Case 18-12356 Doc 1 Filed 04/27/18 Entered 04/27/18 10:37:41 Desc Main UNITED STATES BANKRUPTCY COURT
MORTHERN DISTRICT OF ILLINOIS Page 1 of 53 Document Fill in this information to identify your case: United States Bankruptcy Court for the: Northern District of Illinois -JEFFREY P. ALLSTEADT, CLERK Case number (If known): Chapter you are filing under: Chapter 7 Chapter 11 ☐ Chapter 12 ☐ Chapter 13 amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/17 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and

Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your Delores government-issued picture First name First name identification (for example, Tomorrow your driver's license or passport). Middle name Middle name Balogun Bring your picture identification to your meeting Last name Last name with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) 2. All other names you have used in the last 8 First name First name Middle name Include your married or maiden names. l ast name Last name First name First name Middle name Middle name Last name Last name 3. Only the last 4 digits of xxx - xx - 8 5 0 2your Social Security number or federal Individual Taxpayer Identification number (ITIN)

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| Debtor 1 Delores Ton First Name Middle | norrow Balogun Last Name | | Case number (if known) |
|--|--|---|--|
| Prediktivite talah di kalangan da da di katan pertumbah da | About Debtor 1: | ettikket ki filikulesia esiat ola etaketaanian ki kapatainan ki | About Debtor 2 (Spouse Only in a Joint Case): |
| Any business names and Employer Identification Numbers (EIN) you have used in | I have not used any business r | names or EINs. | ☐ I have not used any business names or EINs. |
| the last 8 years | Business name | | Business name |
| Include trade names and doing business as names | | | |
| comy business as harres | Business name | | Business name |
| | EIN | | EIN |
| | EIN | Military value | EIN |
| 5. Where you live | mentrement for distributed and feel of the committee and the footback and the present committee and make the present committee and the com | nderfactur (III-kan) gele i Pill-Adengia (ang vinning ang ang kandalanda) saturanéng | If Debtor 2 lives at a different address: |
| | 9051 S. Euclid | | |
| | Number Street | | Number Street |
| | Chiana | | |
| | Chicago City | IL 60617 State ZIP Code | City State ZIP Code |
| | Cook | | State Eli Odda |
| | County | | County |
| | If your mailing address is different above, fill it in here. Note that the any notices to you at this mailing ad | court will send | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | | Number Street |
| | P.O. Box | | P.O. Box |
| | City | State ZIP Code | City State ZIP Code |
| . Why you are choosing | Check one: | ort. Miner kalan kalan kipelipak i ilan-daf Ungar Palang, kirim milasakan kalan sala balan A | Check one: |
| this district to file for bankruptcy | Over the last 180 days before fill I have lived in this district longer other district. | ing this petition, than in any | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |
| | 400 Mars. | | |
| | | | |

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| | | Last Name | | Case number (if i | |
|---|--|--|---|--|--|
| | | | | | |
| art 2: Tell the Court Abo | out Your I | Bankruptcy Case | | | |
| The chapter of the Bankruptcy Code you | Check of | one. (For a brief descriptio kruptcy (Form 2010)). Also | n of each, see <i>Not</i> o, go to the top of p | ice Required by 11 age 1 and check t | U.S.C. § 342(b) for Individuals Filing he appropriate box. |
| are choosing to file under | ☑ Cha | apter 7 | | | |
| | ☐ Cha | apter 11 | | | |
| | ☐ Cha | apter 12 | | | |
| | ☐ Cha | pter 13 | | | |
| How you will pay the fee | loca you sub with I ne App I rec By I less pay | al court for more details rself, you may pay with mitting your payment or a pre-printed address. ed to pay the fee in in plication for Individuals to the pay that my fee be waw, a judge may, but is than 150% of the offici | about how you no cash, cashier's on your behalf, you stallments. If you pay The Filing raived (You may not required to, all poverty line the lif you choose the | nay pay. Typical check, or money ur attorney may u choose this or Fee in Installme request this optwaive your fee, at applies to you his option, you m | eck with the clerk's office in your ly, if you are paying the fee order. If your attorney is pay with a credit card or check bition, sign and attach the ents (Official Form 103A). In only if you are filing for Chapter 7 and may do so only if your income is r family size and you are unable to ust fill out the Application to Have the with your petition. |
| | | | | | |
| bankruptcy within the | ☑ No | District | \165 | | |
| | | District | - | MM / DD / YYYY | |
| bankruptcy within the | | District | - | MM / DD / YYYY | |
| bankruptcy within the | | | When | MM / DD / YYYY | Case number |
| bankruptcy within the | | District | When | MM / DD / YYYY | Case number |
| bankruptcy within the last 8 years? Are any bankruptcy | | District | When | MM / DD / YYYY | Case number |
| bankruptcy within the last 8 years? Are any bankruptcy cases pending or being filed by a spouse who is | ☐ Yes. | District | When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number |
| bankruptcy within the last 8 years? Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an | Yes. No Yes. | District Debtor | When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number |
| Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an | Yes. No Yes. | District Debtor District | When When | MM / DD / YYYY | Case number, if known |
| bankruptcy within the last 8 years? Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an | ☑ Yes. ☑ No ☐ Yes. | District Debtor District Debtor District | When When When When | MM / DD / YYYY | Case number |
| | ☐ Yes. ☐ No ☐ Yes. ☐ No. | District Debtor District | When When When | MM / DD / YYYY | Case number Case number Relationship to you Case number, if known Relationship to you Case number, if known |

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| De | btor 1 | | | OW | Balogun | | Case number (a | if knawn) | | |
|-----|--|--|-------------------|-------------------------------|---|--|--|--|---------------------|-------------|
| | | First Name | Middle Name | | Last Name | | | | | |
| | | | | | | | | | | |
| Pa | irt 3: R | leport Abou | it Any Bus | ines | ses You Own as a | Sole Proprieto | r | | | |
| | | | | | | | | | | - |
| 12. | Are you | a sole prop | orietor [| J No. | Go to Part 4. | | | | | |
| | of any f | ull- or part- | time | | | | | | | |
| | busines | | | i Yes | . Name and location of | business | | | | |
| | | oprietorship is you operate a | | | | | | | | |
| | individual | , and is not a | | | Name of business, if an | / | | | | |
| | separate | legal entity su tion, partners | ich as | | | | | | | |
| | LLC. | atori, partificio | rup, or | | Number Street | | · · · · · · · · · · · · · · · · · · · | | | |
| | | e more than o | | | | | | | | |
| | | rietorship, use sheet and atta | | | | A | | | | |
| | to this pet | | | | City | A. T. A. | State | ZIP Code | | |
| | | | | | Ony | | State | ZIP Code | | |
| | | | | | Check the appropriat | a hov to dascriba | vous business: | | | |
| | | | | | | | | | | |
| | | | | | | | n 11 U.S.C. § 101(27A | ** | | |
| | | | | | W | | ed in 11 U.S.C. § 101(5 | 51B)) | | |
| | | | | | Stockbroker (as d | | - ' ' | | | |
| | | | | | | | 1 U.S.C. § 101(6)) | | | |
| | | | | | None of the above | e | | | | |
| 13. | 3. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | | nd m siness ar | an set ost rea ny of ti | appropriate deadlines. cent balance sheet, sta nese documents do no | . If you indicate the etement of operati it exist, follow the | st know whether you ar at you are a small busi ions, cash-flow statem procedure in 11 U.S.C | iness debtor, you i ent, and federal in | must attach vour | |
| | | nition of <i>small</i> | | | I am not filing under (| • | | | | |
| | | debtor, see § 101(51D). | | No. | I am filing under Chap the Bankruptcy Code. | oter 11, but I am N | NOT a small business o | debtor according to | o the definition in | |
| | | | | Yes. | I am filing under Chap Bankruptcy Code. | eter 11 and I am a | small business debtor | r according to the | definition in the | |
| | | | | | | | | | | |
| Pa | rt 4: R | eport if You | Own or h | lave | Any Hazardous Pr | operty or Any ! | Property That Nee | ds Immediate | Attention | |
| | | | | | | | | | | |
| | | wn or have | | No | | | | | | |
| | | that poses o pose a th | | Yes. | What is the hazard? | | | | | |
| | of immin | | icat — | | *************************************** | *************************************** | | * *** | | |
| | | ole hazard t | | | | | | | | _ |
| | • | ealth or safe u own any | ety? | | | | | | | |
| | | that needs | | | 15. | | | | | |
| | | te attention | = | | it immediate attentio | n is needed, why | is it needed? | | | - |
| | perishable that must l | ole, do you ow goods, or live be fed, or a bu urgent repair | estock uilding | | | | | | | |
| | | | | | Where is the propert | y? | | | | |
| | | | | | | Number | Street | | | _ |
| | | | | | | | | | | |
| | | | | | | | | 7-70-V | | |
| | | | | | | City | | State | ZIP Code | _ |
| | | | | | | | | | | |

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| Debtor | 1 |
|--------|---|
|--------|---|

Delores Tomorrow Balogun

| Case number (if known) | |
|------------------------|--|
|------------------------|--|

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing a | bout |
|---|------|
| credit counseling because of: | |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| l am | not | required | to | receive a | briefing | about |
|------|-------|----------|----|------------|----------|-------|
| cred | it co | unseling | b | ecause of: | | |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| De | btor 1 Delores Tom First Name Middle Nam | orrow Balogun | Case number (if kn | iown) |
|---------|---|---|--|---|
| B | art 6: Answer These Que | stions for Reporting Purpo | ses | |
| 16. | What kind of debts do | 16a. Are your debts prima as "incurred by an individu | irily consumer debts? Consumer debts consumer debts? Consumer debts consumer debt | ots are defined in 11 U.S.C. § 101(8) sehold purpose." |
| | you have? | No. Go to line 16b. Yes. Go to line 17. | , | |
| | | 16b. Are your debts prima money for a business or in | rily business debts? Business debts nvestment or through the operation of the | are debts that you incurred to obtain business or investment. |
| | | No. Go to line 16c. Yes. Go to line 17. | • | |
| | | 16c. State the type of debts yo | u owe that are not consumer debts or but | siness debts. |
| 17. | Are you filing under Chapter 7? | □ No. I am not filing under C | hapter 7. Go to line 18. | нический при |
| | Do you estimate that after any exempt property is | Yes. I am filing under Chap administrative expens | ter 7. Do you estimate that after any exer es are paid that funds will be available to | npt property is excluded and distribute to unsecured creditors? |
| | excluded and | ☑ No | , | and the division of data is. |
| | administrative expenses are paid that funds will be available for distribution to unsecured creditors? | ☐ Yes | | |
| 18. | How many creditors do you estimate that you | 2 1-49 | 1,000-5,000 | того от полити полити по |
| ***** | owe? | 50-99 100-199 200-999 | 5,001-10,000 10,001-25,000 | 50,001-100,000 More than 100,000 |
| 19. | How much do you estimate your assets to | 2 \$0-\$50,000 | \$1,000,001-\$10 million | \$500,000,001-\$1 billion |
| | be worth? | □ \$50,001-\$100,000 □ \$100,001-\$500,000 | □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million | \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion |
| MINNIAL | te Berkenberk er semmet kommunistering er emstekklingskirk kommet karl alder fransk er er kommenter stressen m | \$500,001-\$1 million | \$100,000,001-\$500 million | ☐ More than \$50 billion |
| | How much do you estimate your liabilities | \$0-\$50,000 | \$1,000,001-\$10 million | \$500,000,001-\$1 billion |
| | to be? | 2 \$50,001-\$100,000 □ \$100,001-\$500,000 | □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million | ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion |
| | Cian Data | □ \$500,001-\$1 million | □ \$100,000,001-\$500 million | More than \$50 billion |
| | rt 7: Sign Below | I have examined this petition, at correct. | nd I declare under penalty of perjury that | the information provided is true and |
| | | If I have chosen to file under Ch | napter 7, I am aware that I may proceed, i I understand the relief available under ea | if eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed |
| | | If no attorney represents me anthis document, I have obtained | d I did not pay or agree to pay someone vand read the notice required by 11 U.S.C | who is not an attorney to help me fill out . § 342(b). |
| | | | ith the chapter of title 11, United States C | |
| | | I understand making a false stal with a bankruptcy case can result U.S.O §§ 152-1341, 1519, a | alt in fines up to \$250,000, or imprisonme | money or property by fraud in connection nt for up to 20 years, or both. |
| | | * | <u> </u> | |
| | | Signature of Debtor 1 | Signature | e of Debtor 2 |
| | | Executed on UY O I | Executed | on |

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| or 1 Delores Torno First Name Middle Name | errow Balogun e Last Name | Case number (# known) | | |
|---|---|-----------------------|----------|--|
| your attorney, if you are resented by one ou are not represented an attorney, you do not d to file this page. | I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about el to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the de the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. | | | |
| u to me this page. | × | Date | | |
| | Signature of Attorney for Debtor | MM / | DD /YYYY | |
| | Printed name | | | |
| | Firm name | | | |
| | Number Street | | | |
| | City | State ZIP Code | | |
| | Contact phone | Email address | | |
| | | | | |
| | Bar number | State | | |
| | | | | |
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| | Delores Tomol | rrow Balogun Last Name | Case number (# known) | | | |
|--|--|--|---|--|--|--|
| ankrupt ittorney | f you are filing this cy without an | should understand that many people fi | kruptcy has long-term financial and legal | | | |
| f you are represented by an attorney, you do not need to file this page. | | To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay. | | | | |
| | | court. Even if you plan to pay a particular de in your schedules. If you do not list a debt, the property or properly claim it as exempt, you also deny you a discharge of all your debts it case, such as destroying or hiding property, | he schedules that you are required to file with the bt outside of your bankruptcy, you must list that debt ne debt may not be discharged. If you do not list may not be able to keep the property. The judge can f you do something dishonest in your bankruptcy falsifying records, or lying. Individual bankruptcy lebtors have been accurate, truthful, and complete. could be fined and imprisoned. | | | |
| | | hired an attorney. The court will not treat you successful, you must be familiar with the Uni | court expects you to follow the rules as if you had a differently because you are filing for yourself. To be ited States Bankruptcy Code, the Federal Rules of the court in which your case is filed. You must also at apply. | | | |
| | | consequences? | serious action with long-term financial and legal | | | |
| | | ☐ No ☑ Yes | | | | |
| | | | ious crime and that if your bankruptcy forms are or imprisoned? | | | |
| | | □ No ☑ Yes | | | | |
| | | ✓ No Yes. Name of Person | not an attorney to help you fill out your bankruptcy forms? | | | |
| | | Attach Bankruptcy Petition Preparer's I | Notice, Declaration, and Signature (Official Form 119). | | | |
| | | By signing here, I acknowledge that I underst have read and understood this notice, and I a attorney may cause me to lose my rights or p | rand the risks involved in filing without an attorney. I am aware that filing a bankruptcy case without an property if I do not properly handle the case. | | | |
| | | | | | | |
| | | Signature of Debtor1 | Signature of Debtor 2 | | | |

Cell phone

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| Fill in this information to identify your case: | |
|--|--------------------------------------|
| Debtor 1 Prist Name Bulyun Middle Name Bulyun Last Name | |
| Debtor 2 (Spouse, if filing) First Name Middle Name Last Name | |
| United States Bankruptcy Court for the: NUTHUM District of Illinui 5 | |
| Case number (If known) | Check if this is an amended filing |
| | amended filling |
| Official Form 106Sum | |
| Summary of Your Assets and Liabilities and Certain Statistical Info | rmation 12/15 |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended your original forms, you must fill out a new Summary and check the box at the top of this page. Part 1: Summarize Your Assets | supplying correct |
| | |
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) | . 000 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$ 1050.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | s_1050.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | Amount you owe |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ 45,000 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ <u>45,000</u> \$ <u>13,000</u> |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | + \$ 99,093.00 |
| Your total liabilities | s 157,093 |
| Part 3: Summarize Your Income and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) | IENY IN |
| Copy your combined monthly income from line 12 of Schedule I | s 1000.00 |
| 5. Schedule J: Your Expenses (Official Form 106J) | <u> 1500.00</u> <u> 1625.00</u> |
| Copy your monthly expenses from line 22c of Schedule J | \$ TWWO:00 |
| | |

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9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

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| fill in this information to identify your case and thi | is filing: | | |
|---|--|--|---|
| Delores Tomorrow Balogun | | | |
| First Name Middle Name | Last Name | | |
| Oouse, if filing) First Name Middle Name | Last Name | | |
| ted States Bankruptcy Court for the: District | ct of | | |
| se number | | | |
| | | Ţ | Check if this is a |
| | | | amended filing |
| Official Form 106A/B | | | |
| chedule A/B: Propert | v | | 4045 |
| | s. List an asset only once. If an asset fits in more | | 12/15 |
| | Land, or Other Real Estate You Own or Ha | | |
| No. Go to Part 2. | <u> </u> | - | |
| Yes. Where is the property? | | | |
| | What is the property? Check all that apply. | Do not deduct secured cia | aims or exemptions. Pu |
| 1.1. | ☐ Single-family home ☐ Duplex or multi-unit building | the amount of any secure Creditors Who Have Clair | ed claims on Schedule L ms Secured by Property |
| Street address, if available, or other description | Condominium or cooperative | | |
| | Manufactured or mobile home | Current value of the entire property? | portion you own? |
| | Land | \$ | \$ |
| | ☐ Investment property ☐ Timeshare | Describe the nature of | |
| City State ZIP Code | Other | interest (such as fee | simple, tenancy by |
| | Who has an interest in the property? Check one. | the entireties, or a life | e estate), if known. |
| | Debtor 1 only | | **** |
| County | Debtor 2 only | | |
| | Debtor 1 and Debtor 2 only | Check if this is co | mmunity property |
| | At least one of the debtors and another | (see instructions) | |
| | Other information you wish to add about this it property identification number: | em, such as local | |
| f you own or have more than one, list here: | | | |
| | What is the property? Check all that apply. | Do not dodust appropriate | |
| 4.3 | Single-family home | Do not deduct secured cla the amount of any secured | d claims on Schedule D |
| 1.2. Street address, if available, or other description | Duplex or multi-unit building | Creditors Who Have Clain | ns Secured by Property. |
| | Condominium or cooperative Manufactured or mobile home | Current value of the | |
| | Land | entire property? | portion you own? |
| | ☐ Investment property | 5 | \$ |
| City State ZIP Code | ☐ Timeshare | Describe the nature o | f your ownership |
| State Zir Gode | Other | interest (such as fee s the entireties, or a life | simple, tenancy by estate), if known |
| | Who has an interest in the property? Check one. | and the second second | , |
| | Debtor 1 only | | 11711 |

County

Debtor 1 and Debtor 2 only

At least one of the debtors and another

property identification number:

Other information you wish to add about this item, such as local

Debtor 2 only

☐ Check if this is community property

(see instructions)

| | Case 18-1 | | | Decree 10 of F0 | | |
|----------------------------------|--|--|---|--|---|---|
| ebtor 1 | Delores To | omorrow | Balogun | Document Page 12 of 53 | | |
| | First Name # | Middle Name | Last Name | Case number (# | (Rnown) | |
| | | | | | | |
| | | | | What is the property? Check all that apply. | | |
| 1.3. | | | | ☐ Single-family home | Do not deduct secured cl the amount of any secure | aims or exemptions. Put ed claims on Schedule D: |
| 1.5. | Street address, if avail | lable, or other | description | Duplex or multi-unit building | Creditors Who Have Clai | ms Secured by Property. |
| | | | | Condominium or cooperative | Current value of the | Current value of the |
| | | | | Manufactured or mobile home | entire property? | portion you own? |
| | | | | ☐ Land | \$ | \$ |
| | | | | ☐ Investment property | | |
| | City | State | ZIP Code | ☐ Timeshare | Describe the nature | |
| | | | | Other | interest (such as fee the entireties, or a lif | |
| | | | | Who has an interest in the property? Check one. | | |
| | | | | Debtor 1 only | | |
| | County | | | Debtor 2 only | | |
| | | | | Debtor 1 and Debtor 2 only | Check if this is co | mmunity property |
| | | | | ☐ At least one of the debtors and another | (see instructions) | minumey property |
| | | | | | | |
| | | | | Other information you wish to add about this ite property identification number: | em, such as local | |
| | | | | | | |
| dd t | he dollar value of th | e portion y | ou own for a | ll of your entries from Part 1, including any entries | s for pages | |
| ou t | ave attached for Pa | rt 1. Write t | hat number l | nere | → ···· | \$ |
| | | | | | - | |
| | | | | | | |
| | l | | | | | |
| rt 2: | Describe You | r Vehicle | es | | | |
| rt 2: | Describe You | r Vehicle | | | | |
| | | | | st in any vehicles, whether they are registered or | not? Include any vehicles | |
| you c | own, lease, or have i | egal or equ | itable interes | et in any vehicles, whether they are registered or less also report it on Schedule G: Executory Contracts a | not? Include any vehicles and Unexpired Leases. | 3 |
| you o | own, lease, or have it that someone else dr | l egal or eq u ives. If you I | ritable interes lease a vehicle | e, also report it on Schedule G: Executory Contracts a | not? Include any vehicles and Unexpired Leases. | ······································ |
| you o own Cars, | own, lease, or have I that someone else dr vans, trucks, tracto | l egal or eq u ives. If you I | ritable interes lease a vehicle | e, also report it on Schedule G: Executory Contracts a | not? Include any vehicles and Unexpired Leases. | S |
| you o own Cars, | own, lease, or have I that someone else dr vans, trucks, tracto | l egal or eq u ives. If you I | ritable interes lease a vehicle | e, also report it on Schedule G: Executory Contracts a | not? Include any vehicles and Unexpired Leases. | S |
| you o | own, lease, or have I that someone else dr vans, trucks, tracto | l egal or eq u ives. If you I | ritable interes lease a vehicle | e, also report it on Schedule G: Executory Contracts a | and Unexpired Leases. | |
| own cars, No | wn, lease, or have I that someone else dr vans, trucks, tracto | iegal or equ ives. If you i | itable interes ease a vehicle ility vehicles | e, also report it on <i>Schedule G: Executory Contracts a</i> , motorcycles | and Unexpired Leases. | to a state that a stage of the |
| ou cown cars, | own, lease, or have that someone else drivans, trucks, tractors | l egal or eq u ives. If you I | itable interes ease a vehicle ility vehicles | e, also report it on Schedule G: Executory Contracts and motorcycles Who has an interest in the property? Check one. | and Unexpired Leases. Do not deduct secured cla | ims or exemptions. Put I claims on <i>Schedule D</i> |
| own cars, No | wn, lease, or have I that someone else dr vans, trucks, tracto | iegal or equ ives. If you i | itable interes ease a vehicle ility vehicles | e, also report it on Schedule G: Executory Contracts and motorcycles Who has an interest in the property? Check one. | and Unexpired Leases. Do not deduct secured cla | ims or exemptions. Put I claims on <i>Schedule D</i> : |
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| own cars, No | wwn, lease, or have it that someone else dr vans, trucks, tracto es Make: Model: | iegal or equives. If you it is, sport ut | itable interes ease a vehicle ility vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured cla the amount of any secured Creditors Who Have Claim | ims or exemptions. Put I claims on <i>Schedule D:</i> Is Secured by Property. |
| own cars, No | wwn, lease, or have in that someone else drawans, trucks, tractor es Make: Model: Year: Approximate mileage | iegal or equives. If you it is, sport ut | itable interes ease a vehicle ility vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured cla the amount of any secure Creditors Who Have Claim | ims or exemptions. Put I claims on <i>Schedule D:</i> Is Secured by Property. Current value of the |
| ou cown cars, | wwn, lease, or have in that someone else drivans, trucks, tractor es Make: Model: Year: | iegal or equives. If you it is, sport ut | itable interes ease a vehicle ility vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Do not deduct secured cla the amount of any secure Creditors Who Have Claim | ims or exemptions. Put I claims on <i>Schedule D:</i> Is Secured by Property. Current value of the |
| ars, | wwn, lease, or have in that someone else drawans, trucks, tractor es Make: Model: Year: Approximate mileage | iegal or equives. If you it is, sport ut | itable interes ease a vehicle ility vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured cla the amount of any secure Creditors Who Have Claim | ims or exemptions. Put I claims on Schedule D. Ins Secured by Property. Current value of the portion you own? |
| ars, | wwn, lease, or have in that someone else drawans, trucks, tractor es Make: Model: Year: Approximate mileage | iegal or equives. If you it is, sport ut | itable interes ease a vehicle ility vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured cla the amount of any secure Creditors Who Have Claim | ims or exemptions. Put I claims on Schedule D. Ins Secured by Property. Current value of the portion you own? |
| vou cown | wwn, lease, or have in that someone else drawans, trucks, tractor elses Make: Model: Year: Approximate mileage Other information: | legal or equives. If you lives, sport ut Thir Qx31 201 | nitable interes ease a vehicles fility vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured cla the amount of any secure Creditors Who Have Claim | ims or exemptions. Put I claims on Schedule D. Ins Secured by Property. Current value of the portion you own? |
| you cown Cars, No. Ye | wwn, lease, or have in that someone else drawans, trucks, tractor es Make: Model: Year: Approximate mileage | legal or equives. If you lives, sport ut Thir Qx31 201 | nitable interes ease a vehicles fility vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 26,000 | ims or exemptions. Put I claims on Schedule D. as Secured by Property. Current value of the portion you own? \$ 0.00 |
| you cown Own No Ye 3.1. | wwn, lease, or have in that someone else drawans, trucks, tractor elses Make: Model: Year: Approximate mileage Other information: | legal or equives. If you lives, sport ut Thir Qx31 201 | nitable interes ease a vehicles fility vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured cla the amount of any secure Creditors Who Have Claim | ims or exemptions. Put I claims on Schedule D: as Secured by Property. Current value of the portion you own? \$ 0.00 |
| you cown Cars, Ne XYe 3.1. | wwn, lease, or have ithat someone else drivans, trucks, tractors wans, trucks, tractors wans, trucks, tractors was Make: Model: Year: Approximate mileage Other information: own or have more that Make: | legal or equives. If you lives, sport ut Thir Qx31 201 | nitable interes ease a vehicles fility vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 26,000 | ims or exemptions. Put d claims on Schedule D: as Secured by Property. Current value of the portion you own? \$ \(\begin{align*} \begintarrange & \begin{align*} \begin{align*} \begin{align*} a |
| you cown Cars, No Ye you 3.2. | wwn, lease, or have in that someone else drawans, trucks, tractor of es. Make: Model: Year: Approximate mileage Other information: own or have more that Make: Model: | legal or equives. If you lives, sport ut Thir Qx31 201 | nitable interes ease a vehicles fility vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 25,000 | ims or exemptions. Put d claims on Schedule D: as Secured by Property. Current value of the portion you own? \$ \(\begin{align*} \begintarrange & \begin{align*} \begin{align*} \begin{align*} a |
| you cown Cars, No Ye you 3.2. | wwn, lease, or have ithat someone else drivans, trucks, tractors wans, trucks, tractors wans, trucks, tractors was Make: Model: Year: Approximate mileage Other information: own or have more that Make: | legal or equives. If you lives, sport ut Thir Qx31 201 | nitable interes ease a vehicles fility vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. | Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 25,000 Do not deduct secured claithe amount of any secured Creditors Who Have Claim Current value of the | ims or exemptions. Put I claims on Schedule D: is Secured by Property. Current value of the portion you own? \$ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 |
| you cown Cars, Ne Ye Ye you 3.2. | wwn, lease, or have in that someone else drawans, trucks, tractor of es. Make: Model: Year: Approximate mileage Other information: own or have more that Make: Model: | iegal or equives. If you in the second of th | nitable interes ease a vehicles fility vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured clathe amount of any securec Creditors Who Have Claim Current value of the entire property? \$ 26,000 Do not deduct secured claim the amount of any secured Creditors Who Have Claim | ims or exemptions. Put I claims on Schedule D: is Secured by Property. Current value of the portion you own? \$ \(\begin{align*} \int \cdot \c |
| you cown Own Cars, Ye 3.1. | wwn, lease, or have in that someone else drawns, trucks, tractor of ess. Make: Model: Year: Approximate mileage Other information: own or have more that Make: Model: Year: | iegal or equives. If you in the second of th | nitable interes ease a vehicles fility vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 25,000 Do not deduct secured claithe amount of any secured Creditors Who Have Claim Current value of the | ims or exemptions. Put I claims on Schedule D: is Secured by Property. Current value of the portion you own? \$ 0.00 ims or exemptions. Put claims on Schedule D: is Secured by Property. Current value of the |
| you cown Own Cars, Ye 3.1. | wwn, lease, or have ithat someone else drivans, trucks, tractories Make: Model: Year: Approximate mileage Other information: own or have more that Make: Model: Year: Approximate mileage | iegal or equives. If you in the second of th | nitable interes ease a vehicles fility vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 25,000 Do not deduct secured claithe amount of any secured Creditors Who Have Claim Current value of the | ims or exemptions. Put I claims on Schedule D: is Secured by Property. Current value of the portion you own? \$ 0.00 ims or exemptions. Put claims on Schedule D: is Secured by Property. Current value of the |

Delores Tomorrow Balogun Debtor 1 Case number (if known) First Name Middle Name Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No. ☐ Yes Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. 4.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another ☐ Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

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Debtor 1

Delores

Tomorrow Middle Name

Balogun

Case number (if known

Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware **☑** No Yes. Describe.... 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe...........32in TV, Computer, iPhone 600.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☑ No Yes. Describe...... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments M No Yes. Describe...... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No No Yes. Describe...... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe. Everyday clothes: shirts, jeans, and pants 400.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe...... 13. Non-farm animals Examples: Dogs, cats, birds, horses No. ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ✓ No Yes. Give specific information 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached 1,000.00

for Part 3. Write that number here

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Debtor 1

Delores

First Name

Tomorrow Middle Name

Balogun Last Name

Case number (if known)_

| Do you own or have any | Institution name: 17.1. Checking account: 17.2. Checking account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.7. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Other financial account: | | | |
|---|---|--|---|--|
| 16. Cash Evamples: Money you | ash xamples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes | | | |
| | nave in your wallet, in your no | me, in a sale deposit box, and on n | and when you lie your petition | 1 |
| □ No | | | | |
| ☑ Yes | | | Cash: | \$\$ |
| and other s | savings, or other financial acco | unts; certificates of deposit; shares nultiple accounts with the same ins | in credit unions, brokerage ho itution, list each. | ouses, |
| No No | | | | |
| ☐ Yes | | Institution name: | | |
| | 17.1. Checking account: | | | \$ |
| | 17.2. Checking account: | | *************************************** | \$ |
| | 17.3. Savings account: | | | \$ |
| | 17.4. Savings account: | | | |
| | 17.5. Certificates of deposit: | | | |
| | 17.6. Other financial account: | | | Ψ |
| | have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Cash: Cash: Savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: | | | |
| | 17.8. Other financial account: | | | |
| | 17.9. Other financial account: | | | Y-1111-1111-111-11-11-11-11-11-11-11-11- |
| | | | | <u> </u> |
| | • | erage firms, money market accoun | ts | |
| ☑ No | | | | |
| ☐ Yes | Institution or issuer name: | | | |
| | | | | \$ |
| The second control of | | | | \$ |
| | - Pilothama da Hariba Mada Mada Mada Mada Mada Mada Mada Ma | , | | \$ |
| | | table interest in any of the following? Current value of the portion you own? Do not deduct secured claims or examptions. Vallet, in your home, in a safe deposit box, and on hand when you file your petition Cash: Cash: S 50.00 er financial accounts, certificates of deposit; shares in credit unions, brokerage houses, ris. If you have multiple accounts with the same institution, list each. Institution name: Institution name: Ing account: S S S S S Tests In incorporated and unincorporated businesses, including an interest in ure | | |
| | | erated and unincorporated busine | esses, including an interest | in |
| No | - | | nr . ż | |
| Yes. Give specific | Name of entity: | | % of ownership 0% % | ; |
| information about | · · · · · · · · · · · · · · · · · · · | | | \$ |
| them | *************************************** | | 0% % | \$ |

| Debtor 1 | Case 18 Delores First Name | | OOC 1 Balogun Last Nam | | Entered 04/27 Page 16 of 53 Case num | | Desc Main |
|---------------------|--|---------------------|---|--|--|---------------------------------------|-----------|
| Negotia Non-ne | able instruments | include personal | checks, c | | otiable instruments sory notes, and money or signing or delivering them | | |
| infor | . Give specific | Issuer name: | | | | | e |
| rien | m | | | | Name and the state of the state | | \$ |
| | nent or pension les: Interests in II | | gh, 4 01(k), | 403(b), thrift savings ac | counts, or other pension | or profit-sharing plans | |
| | . List each ount separately. | Type of account | :: Insti | tution name: | | | |
| | | 401(k) or similar p | plan: | | | | \$ |
| | | Pension plan: | | | | | \$ |
| | | IRA: | *************************************** | | | | \$ |
| | | Retirement accou | ınt: | | | | \$ |
| | | Keogh: | | | | | \$ |
| | | Additional accoun | nt: | | | | \$ |
| | | Additional accoun | nt: | | | | \$ |
| Your sha Example | y deposits and pare of all unused es: Agreements lies, or others | l deposits you ha | ve made s epaid rent | o that you may continue , public utilities (electric, | service or use from a co gas, water), telecommun | mpany ications | |
| No | | | | | | | |
| ☐ Yes | •••••• | | Institutio | n name or individual: | | | |
| | | Electric: | | | | | \$ |
| | | Gas: | | | | | \$ |
| | | Heating oil: | | | | | \$ |
| | | | on rental uni | | | · · · · · · · · · · · · · · · · · · · | \$ |
| | | Prepaid rent: | *************************************** | | | | \$ |
| | | Telephone: | | | | | . |

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

Water:

Other:

Rented furniture:

| EJ NO | | |
|--------------|------------------------------|----|
| ☐ Yes | Issuer name and description: | |
| | | \$ |
| | | \$ |
| | | \$ |

Case 18-12356 Doc 1 Filed 04/27/18 Entered 04/27/18 10:37:41 Desc Main Delores Tomorrow Balogun First Name Middle Name Last Na

| 26 U.S.C. §§ 530(b)(1), 529A(b), | | | | |
|--|--|--|--|--|
| ☑ No | and ocoloy(1). | | | |
| DI V | | | | |
| | istitution name and d | escription. Separately file the records of any intere | sts.11 U.S.C. § 521 | (c): |
| need | 10° | | | . \$ |
| _ | | | | \$ |
| ener | VAVA-Mada-bash- | | | . s |
| | | | | Ψ |
| Trusts, equitable or future interexercisable for your benefit | ests in property (ot | her than anything listed in line 1), and rights or | powers | |
| ☑ No | | | | |
| Yes. Give specific | Philips of a charled relativistic and declarate of the decision of the consequence of the | | terné a meljer fra romanym a za supara na zamuje, oroganym, pra s pozi supa supa superposuje. | obuque e |
| information about them | | | | \$ |
| S. (| | | | -commit |
| Patents, copyrights, trademark Examples: Internet domain name | - | other intellectual property s from royalties and licensing agreements | | |
| No No | o, monatos, procesu | o non royanica and nocioning agreements | | |
| Yes. Give specific | | | and the former and transfer decreases accommon to the contract of the contract | |
| information about them | | | | \$ |
| An American | | | | |
| Licenses, franchises, and othe | | | | |
| Examples: Building permits, exclu | usive licenses, coope | rative association holdings, liquor licenses, profess | ional licenses | |
| ☑ No | | | | |
| Yes. Give specific | | - Committee in the state of the | " Ar la "" A " A " A " A " A " A " A " A " A " | · · · · · · · · · · · · · · · · · · · |
| information about them | | | | \$ |
| | | | | |
| 5 + 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 | | | | and Carlo San Carlo San C |
| | | | | |
| | | | | portion you own? Do not deduct secured |
| | | | | portion you own? |
| oney or property owed to you? Tax refunds owed to you | | | | portion you own? Do not deduct secured |
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| Tax refunds owed to you No See No S | alimony, spousal sup | port, child support, maintenance, divorce settleme | State: Local: nt, property settleme | portion you own? Do not deduct secured claims or exemptions. \$ |
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| Tax refunds owed to you No See No S | alimony, spousal sup | port, child support, maintenance, divorce settleme | State: Local: nt, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$ |
| Tax refunds owed to you No Yes. Give specific information about them, including whyou already filed the retuand the tax years Family support Examples: Past due or lump sum No Yes. Give specific information | alimony, spousal sup | port, child support, maintenance, divorce settleme | State: Local: Int, property settlement Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$ |
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Debtor 1

Case 18-12356 Doc 1 Filed 04/27/18 Entered 04/27/18 10:37:41 Document Page 18 of 53 Delores Tomorrow Balogun Debtor 1 First Name Middle Name 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance **1** No ☐ Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value. 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ✓ No ☐ Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue 2 No Yes. Describe each claim. 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims M No ☐ Yes. Describe each claim..... 35. Any financial assets you did not already list 2 No ☐ Yes. Give specific information..... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached 50.00 for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38 Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned 2 No Yes, Describe.....

Official Form 106A/B

☐ Yes. Describe.....

No

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, moderns, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

Case 18-12356 Doc 1 Filed 04/27/18 Entered 04/27/18 10:37:41 Desc Main Page 19 of 53 Document Delores Tomorrow Balogun Debtor 1 Case number (if known) First Name Middle Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☐ Yes. Describe.... 41. Inventory No. Yes. Describe... 42. Interests in partnerships or joint ventures **2** No Yes. Describe...... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations No. Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe...... 44. Any business-related property you did not already list ₩ No Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that пumber here Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish ■ No ☐ Yes.....

Page 20 of 53 Document Delores Balogun Tomorrow Debtor 1 Case number (if known) First Name Middle Name 48. Crops—either growing or harvested ☑ No Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed ☐ Yes..... 51 Any farm- and commercial fishing-related property you did not already list ☑ No ☐ Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **2** No ☐ Yes. Give specific information..... 54. Add the dollar value of all of your entries from Part 7. Write that number here 0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 0.00 56. Part 2: Total vehicles, line 5 1,000.00 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 50.00 59. Part 5: Total business-related property, line 45 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 1,050.00 Copy personal property total > + \$_ 62. Total personal property. Add lines 56 through 61. 1.050.00 63. Total of all property on Schedule A/B. Add line 55 + line 62. 1,050.00

Case 18-12356

Doc 1

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| Fill in this information to identify your cas | e: | | |
|---|---|---|------------------------------------|
| Debtor 1 Deloves Tomovi | w Balogup | | |
| First Name Middle N | Name Last Name | | |
| (Spouse, if filing) First Name Middle N United States Bankruptcy Court for the: | | | |
| Case number | TA DISHICT OF THE TOTAL OF THE | | ☐ Check if this is an |
| (if known) | | | amended filing |
| Official Form 106C | | | |
| Schedule C: The Pr | operty You | Claim as Exemp | t 04/16 |
| Be as complete and accurate as possible. If two | | | |
| Using the property you listed on Schedule A/B: space is needed, fill out and attach to this page your name and case number (if known). | Property (Official Form 1064 | VB) as your source, list the property that | you claim as exempt. If more |
| For each item of property you claim as exen | npt, you must specify the a | amount of the exemption you claim. O | ne way of doing so is to state a |
| specific dollar amount as exempt. Alternative of any applicable statutory limit. Some exem | ely, you may claim the full | fair market value of the property bein | g exempted up to the amount |
| retirement funds-may be unlimited in dolla | r amount. However, if you | claim an exemption of 100% of fair ma | rket value under a law that |
| limits the exemption to a particular dollar an would be limited to the applicable statutory | | property is determined to exceed that | amount, your exemption |
| Part 1: Identify the Property You C | laim aa Evamat | | |
| Tacking the Property For O | ann as Exempt | | |
| Which set of exemptions are you claimi | | | |
| You are claiming state and federal nor You are claiming federal exemptions. | nbankruptcy exemptions. 11 | U.S.C. § 522(b)(3) | |
| — Fourth Gallining Touchar Compileria. | 11 0.0.0. g 022(b)(2) | | |
| 2. For any property you list on Schedule A | I/B that you claim as exem | pt, fill in the information below. | |
| Brief description of the property and line Schedule A/B that lists this property | on Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| Brief description: | \$ | □s | |
| Line from | | 100% of fair market value, up to | |
| Schedule A/B: | | any applicable statutory limit | |
| Brief description: | \$ | □ s | |
| Line from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | | |
| Line from Schedule A/B: | | 100% of fair market value, up to any applicable statutory limit | |
| | | • | |
| Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every content on 4/01/19 and | | s filed on or after the date of adjustment \ | |
| ¥ No | | | |
| Yes. Did you acquire the property cove | red by the exemption within | 1,215 days before you filed this case? | |
| ☐ No ☐ Yes | | | |

Document

Last Name

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Debtor 1

Delores First Name

Tomorrow

Balogun

Case number (if known)_

Part 2:

Additional Page

| Brief descript on Schedule | ion of the property and line 4/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|---|--|--------------------------------------|--|--|
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: Line from Schedule A/B: | Camputer, TV, Phone | s_600 | \$ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | Clothes | s 400 | □ \$ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | Cush | s 50 | □ \$ □ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | | \$ | □ \$ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | | \$ | □ \$ to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | | \$ | □ \$ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | | \$ | \$ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | **** | \$ | □ \$ □ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | | .\$ | □ \$ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | | \$ | \$ 100% of fair market value, up to any applicable statutory limit | NEW Market and the second and the se |
| Brief description: Line from Schedule A/B: | | \$ | □ \$ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | | \$ | \$ \$ 100% of fair market value, up to any applicable statutory limit | |

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| | | - 3:4- | | en e | | | | | | |
|---|--|---|--|---|--|---|--|---|--|---|
| Fill in this inform | ation to ide | ntify your cas | e: | | | | | | | |
| Debtor 1 Delc | | Tomorrow Middle N | | Last Name | | | | | | |
| Debtor 2 (Spouse, if filing) First N | ame | Middle N | ame | Last Name | | | | | | |
| United States Bankru | intev Court fo | r the Northern | District of Illinois | | | | | | | |
| | -pio) Codit 10 | T die. Tiernien | | | | | | | | |
| Case number (If known) | · · · · · · · · · · · · · · · · · · · | ************************************ | | | | | | | Check i | f this is an |
| | | | | ···· | | | | | amende | ed filing |
| Official For | rm 106 | D | | | | | | | | |
| Schedule | D: C | reditor: | s Who H | ave CI | aims Sec | urc | ed by Pro | per | ty | 12/15 |
| Be as complete a information. If mo additional pages, 1. Do any creditor | ore space is write your rs have clai | needed, copy name and cas ms secured b | the Additional e number (if kn y your property | Page, fill it o own). ? | ut, number the en | tries, | and attach it to thi | s form. | On the top of | i any |
| ☐ No. Check the Yes. Fill in a | | | n to the court wit | h your other s | chedules. You have | e nothi | ng else to report or | this fo | rm. | |
| Part 1: List Al | l Secured | Claims | | | | | | | | |
| | | 3 (A. 1914) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | | | | Column A | Colui | nn B | Column C |
| 2. List all secured for each claim. As much as pos | If more than | one creditor ha | as a particular cl | aim, list the ot | her creditors in Par | | Amount of claim Do not deduct the value of collateral. | | e of collateral supports this n | Unsecured portion If any |
| 2.1 Nissan Mort | or ACCEF | PTANCE | Describe the p | roperty that s | ecures the claim: | | s 45,000.0 |) _s | 25,000.00 | S |
| Creditor's Name | <u> </u> | | 2017 Infinti (| | | | | ************************************** | , | |
| 2 | | | 2017 111111111 | avon Cai | | | | | | |
| Number Stre | | | Ac of the date | vou file the cl | aim is: Check all tha | t anniv | · · · · · · · · · · · · · · · · · · · | | | |
| POB 660366 | <u> </u> | | Contingent | you me, me ci | am is. Check all tha | t appiy. | | | | |
| Dallas | T | | Unliquidated | | | | | | | |
| City | Sta | ite ZIP Code | ☐ Disputed | | | | | | | |
| Who owes the de | bt? Check on | ie. | Nature of lien. | Check all that a | oply. | | | | | |
| Debtor 1 only | | | | nt you made (su | ch as mortgage or se | cured | | | | |
| Debtor 2 only | | | car loan) | s /auah an tay lia | en, mechanic's lien) | | | | | |
| Debtor 1 and De At least one of t | | nd another | - | n from a lawsuit | | | | | | |
| | | | | | set) | | _ | | | |
| Check if this community de | | s to a | | | | | - | | | |
| Date debt was inc | urred 12/0 | 01/201€ | Last 4 digits of | account num | ber | | | | | |
| 2.2 | | | englastika kanala karang karana kanala | | Carecas Principal Company of the Com | | \$ | | | 700.00 mm. 100.00 mm. |
| Creditor's Name | • | | Describe the h | ohers mar a | runes the Claim. | | 1 | | · · · · · · · · · · · · · · · · · · · |) <u> </u> |
| | | | | | | | | | | |
| Number Stre | et | | | | | |] | | | |
| | | | Contingent | you file, the ci | aim is: Check all that | appiy. | | | | |
| | | | Unliquidated | | | | | | | |
| City | Sta | te ZIP Code | Disputed | | | | | | | |
| Who owes the del | bt? Check on | e. | Nature of lien. | Check all that ap | opły. | | | | | |
| Debtor 1 only | | | | | ch as mortgage or sec | cured | | | | |
| Debtor 2 only | | | car loan) | , | | | | | | |
| Debtor 1 and De | | | | - | n, mechanic's lien) | | | | | |
| At least one of t | he debtors an | d another | | n from a lawsuit | set) | | | | | |
| Check if this community de | ebt | to a | · | | | *************************************** | • | | | |
| Date debt was inc | ed-endphiliphysistical printing pressure | epenyaly successional monget property succession | Last 4 digits of | NOOTHAN PARTIE OF THE PROPERTY OF THE PERTY | THE PROPERTY OF THE PROPERTY O | SHEEDING MADERICAN | LUGARAN | and the same of | angwa waanna aanna digaalaya aarma ilaan kanda aanahada aastaan ka | PRINTER AND CONTRACTOR OF THE |
| Add the dollar | value of yo | our entries in C | olumn A on thi | s page. Write | that number here |): | \$45,000.00 | 1 | | |

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|-------------------|--|---|--|--|--|--|
| | ill in this i | nformation to identify | your case: | | | |
| | ebtor 1 | Delores | Tomorrow | Balogun | | |
| - | | First Name | Middle Name | Lasi Name | | |
| | ebtor 2 Spouse, if filing) | First Name | Middle Name | Last Name | | |
| İ | | | | | | |
| " | miled States | Bankruptcy Court for the: | Northern District | t of Illinois | | |
| | ase number If known) | | | | | Check if this is an |
| | . Monny | | | | | amended filing |
| 0 | fficial F | orm 106E/F | | | | |
| | | | | | | |
| 3 | cneat | He E/F: Cre | eaitors v | vno Have U | Insecured Clain | ns 12/15 |
| A/E cre nee | t the other 3: Property ditors with eded, copy additiona | party to any executo (Official Form 106A/ partially secured cla | ry contracts or of the contracts or of the contracts of the contract of the contracts of the contract of | unexpired leases that a dule G: Executory Con- ed in Schedule D: Creathe entries in the boxon umber (if known). | could result in a claim. Also li tracts and Unexpired Leases (ditors Who Have Claims Secu | creditors with NONPRIORITY claims. st executory contracts on Schedule Official Form 106G). Do not include any red by Property. If more space is nuation Page to this page. On the top of |
| | <u> </u> | | | | | |
| 1. | Do any cre | editors have priority | unsecured claim | s against you? | | |
| | Yes. | to Part 2. | | | | |
| 2. | the state of the s | vour priority unsecu | red claims. If a c | reditor has more than or | on priority unencured claim list th | ne creditor separately for each claim. For |
| 1.1 | each daim | listed, identify what type | pe of claim it is. It | a claim has both priorit | v and nonnriggity amounts, list th | at claim here and show both priority and |
| | unsecured | amounts. As much as claims, fill out the Con | possible, list the tinuation Page of | claims in alphabetical or Part 1. If more than one | rder according to the creditor's no e creditor holds a particular claim | ame. If you have more than two priority , list the other creditors in Part 3. |
| | (For an exp | lanation of each type | of claim, see the i | instructions for this form | in the instruction booklet.) | , not the other creditors in Fart 3. |
| | | | | | • | Total claim Priority Nonpriority |
| 2.1 | | | | | | amount amount |
| 2. 1 | Interna Priority Credi | l Revenue Service | <u> </u> | Last 4 digits of accou | unt number 8 5 0 2 | \$_13,000.00 \$ 13,000. 6 \$ |
| | Friding Gredi | tot s Mame | | When was the debt in | 0.4.0.4.00.4.0 | _ |
| | Number | Street | | THICH WAS THE BEST H | iculted: 0 110 1120 10 | |
| | | | 0.01000 | As of the date you file | e, the claim is: Check all that apply | |
| | Kansas City | M(| O 64999 ZIP Code | Contingent | | |
| | Who incu | rred the debt? Check or | | Unliquidated | | |
| | Debtor | | | ☐ Disputed | | |
| | Debtor: | • | | Type of PRIORITY u | nsecured claim: | |
| | | 1 and Debtor 2 only | | ☐ Domestic support of | bligations | |
| | | one of the debtors and a | | | ther debts you owe the government | |
| | ☐ Check | if this claim is for a co | mmunity debt | Claims for death or | personal injury while you were | |
| | | m subject to offset? | | intoxicated | | |
| | 1 No ☐ Yes | | | Other, Specify | | |
| 2 | tik intervesivet vi Gessiyye quuquvan | | and the state of t | | | |
| Ξ | Priority Credit | or's Name | | Last 4 digits of accou | nt number | \$\$ |
| | | | | When was the debt in | curred? | |
| | Number | Street | | As of the data you file | e, the claim is: Check all that apply. | |
| | | | | Contingent | , the claim is: Check all that apply. | |
| | City | State | ZIP Code | Unliquidated | | |
| | Who incur | red the debt? Check on | e. | Disputed | | |
| | Debtor 1 | l only | | Type of DDIADITY | noonumad alaime | |
| | Debtor 2 | | | Type of PRIORITY us Domestic support ob | | |
| | | and Debtor 2 only | | | her debts you owe the government | |
| | | one of the debtors and ar | | | ner debts you owe the government personal injury while you were | |
| | | if this claim is for a co | mmunity debt | intoxicated | | V |
| | ☐ No | n subject to offset? | | Other. Specify | | |
| | ☐ Yes | | | | | |

Debtor 1

Delores

Tomorrow

Document

First Name

Case number (if known)

List All of Your NONPRIORITY Unsecured Claims

| | Do any creditors have nonpriority to No. You have nothing to report in Yes | this part. S | ubmit this form to | the court with your other schedules. | | |
|------------|---|--|---|--|------------------|---|
| 4. | List all of your nonpriority unsecure nonpriority unsecured claim, list the cr | ed claims i editor sepa editor holds | n the alphabetic trately for each cl a particular clair | al order of the creditor who holds each claim. If a creditor has aim. For each claim listed, identify what type of claim it is. Do not n, list the other creditors in Part 3.If you have more than three no | more | than one |
| | _ | | | | Tota | at claim |
| 4,1 | DISCOVER FINANCIAL SEF | RVICE | | Last 4 digits of account number | | |
| | Nonpriority Creditor's Name | | | 04/04/0047 | \$ | 6,074.00 |
| | POB 15316 Number Street | | | When was the debt incurred? 01/01/2017 | | |
| | WILMINGTON | DE | 19850 | | | |
| | City | State | ZIP Code | As of the date you file, the claim is: Check all that apply. | | |
| | | | | Contingent | | |
| | Who incurred the debt? Check one. | | | Unliquidated | | |
| | Debtor 1 only Debtor 2 only | | | ☐ Disputed | | |
| | Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | | |
| | At least one of the debtors and another | er | | Student loans | | |
| | Check if this claim is for a comm | unity daht | | Obligations arising out of a separation agreement or divorce | | |
| | Is the claim subject to offset? | unity dept | | that you did not report as priority claims | | : |
| | No | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Purchases | | |
| | ☐ Yes | | | other. Specify Orean Oald Full lases | | |
| .2 | CAPITAL ONE BANK USA N | economico de la composición del composición de la composición de l | eritari Nobelik (ny Samangangara) e ya sebah ansemsak ana | | introduces. | 4,062.00 |
| | Nonpriority Creditor's Name | <u> </u> | | Last 4 digits of account number When was the debt incurred? 03/01/2017 | \$ | 4,002.00 |
| | PO BOX 30281 | | | | | |
| | Number Street | | | A state of the sta | | |
| | SALT LAKE CITY | UT State | 84130 ZIP Code | As of the date you file, the claim is: Check all that apply. | | |
| | , | Olulo | 211 0000 | ☐ Contingent ☐ Unliquidated | | |
| | Who incurred the debt? Check one. Debtor 1 only | | | Disputed | | |
| | Debtor 2 only | | | | | |
| | Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | | |
| | At least one of the debtors and anothe | r | | Student loans | | |
| | Check if this claim is for a commu | inity debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | Is the claim subject to offset? | | | Debts to pension or profit-sharing plans, and other similar debts | | |
| | Ø No | | | Other. Specify Credit Card Purchases | | |
| | O Yes | and the state of t | enterior, to prographic Almandra film and recolotion for the effective film and the effective | | economic sources | elekskungsversenlings (sversenger) skrivere i Albanisk vari |
| 3 | Best Buy/CNBA Nonpriority Creditor's Name | | | Last 4 digits of account number | r | 1.088.00 |
| grania aya | PO BOX 6497 | www.com | | When was the debt incurred? 11/22/2016 | Φ | 1,000.00 |
| | Number Street | | | - | | |
| | SIOUX FALLS | SD State | 57117 ZIP Code | As of the date you file, the claim is: Check all that apply. | | |
| | • | Siate | ZIP Code | Contingent | | |
| | Who incurred the debt? Check one. | | | ☑ Unliquidated | | |
| | Debtor 1 only Debtor 2 only | | | Disputed | | |
| | Debtor 1 and Debtor 2 only | | | Turn of MONDRIODITY | | |
| | ☐ At least one of the debtors and another | | | Type of NONPRIORITY unsecured claim: | | |
| | ☐ Check if this claim is for a commu | nitv debt | | Student loans Chlications arising out of a securities account and it is a securities as a sec | | |
| | Is the claim subject to offset? | , | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | No No | | | Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | | | ✓ Other. Specify <u>Credit Card Purchases</u> | | |
| | | | | | | |

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Debtor 1

Tomorrow

Document

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Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

| After | listing any entries on this page, n | umber the | em beginning with | 4.4, followed by 4.5, and so forth. | Tı | otal claim |
|-----------------------|--|--|--|--|----------|---------------------------------------|
| 4.4 | Comenity Bank / Lane Bryan | t | | Last 4 digits of account number | \$ | 1,084.00 |
| | Nonpriority Creditor's Name PO BOX 182789 | | | When was the debt incurred? 11/22/2014 | V | |
| | Number Street COLUMBUS | ОН | 43218 | As of the date you file, the claim is: Check all that apply. | | |
| ٧ | Who incurred the debt? Check one. Debtor 1 only | State | ZIP Code | ☐ Contingent ☐ Unliquidated ☐ Disputed | | |
| (((() | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim is for a commuse the claim subject to offset? | | | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Personal Credit Purchases | | |
| | No Yes | الإنجام الأواد الإنجام | vydavynik bberrómberekkopski viskilavia or over | | | |
| 5 1 | Nordstrom Credit Card | | | Last 4 digits of account number | \$ | 967.00 |
| 1 | 3531 E. CALEY AVE | | | When was the debt incurred? 01/06/2015 | | |
| | NGLEWOOD | СО | 80111 | As of the date you file, the claim is: Check all that apply. | | |
| v Ç | the incurred the debt? Check one. Debtor 1 only Debtor 2 only | State | ZIP Code | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: | | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a communication. | | | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| ₩. | the claim subject to offset? No Yes | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Personal Credit Card Purchase | | |
| 6 | re-contraction of the service of the contraction of | tin hall harmon the film fragger or, who a more left sha | engler de Prolitera, lude, politerado de Artono (sen La estacrestión Espergrefo de recurstance par | The state of the contract of t | | 909.00 |
| | arget Credit Card npriority Creditor's Name | | | Last 4 digits of account number | * | |
| | O BOX 673 mber Street | | | When was the debt incurred? 01/22/2015 | | |
| N | IINNEAPOLIS | MN | 55440 | As of the date you file, the claim is: Check all that apply. | | · · · · · · · · · · · · · · · · · · · |
| Cit | • | State | ZIP Code | ☐ Contingent ☑ Unliquidated | | |
| | ho incurred the debt? Check one. Debtor 1 only | | | Disputed | | |
| ă | | | | Type of NONPRIORITY unsecured claim: | | : |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Student loans Obligations arising out of a separation agreement or divorce that | | : |
| | Check if this claim is for a communithe claim subject to offset? | nity debt | | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | |
| Ø | No Yes | | | Other Specify Credit Card Purchases | | |

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Debtor 1

Delores First Name

Tomorrow

Case number (# known)_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

| Comenity Bank / Home | Shopping Ne | twork | Last 4 digits of account number | _{\$_} 1,980.0 |
|--|--|--|--|--|
| PO BOX 182120 | | | When was the debt incurred? 11/22/2016 | ************************************** |
| Number Street COLUMBUS | ОН | 43218 | As of the date you file, the claim is: Check all that apply. | |
| City | State | ZIP Code | Contingent | |
| MM | | | ☑ Unliquidated | |
| Who incurred the debt? Check | one. | | ☐ Disputed | |
| Debtor 1 only | | | | |
| Debtor 2 only Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors and | another | | Student loans | |
| ☐ Check if this claim is for a c | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Is the claim subject to offset? | • | | Debts to pension or profit-sharing plans, and other similar debts | |
| No No | | | Other. Specify Personal Credit Purchases | |
| Yes | | | | |
| KOHLS DEPARTMENT | STORF | t till stede fra grenningen, set til het til Var vilkelse fra står fra til selve til se fredjerel, set eller som | Last 4 digits of account number | s 274.0 |
| Nonpriority Creditor's Name | | | - Manage | φ <u>ε/4.U</u> |
| PO BOX 3115 | | | When was the debt incurred? 01/06/2014 | |
| MILWAUKEE | WI | 53201 | As of the date you file, the claim is: Check all that apply. | |
| City | State | ZIP Code | Contingent | |
| Who incurred the debt? Check o | ne. | | Unliquidated | |
| ✓ Debtor 1 only | | | ☐ Disputed | |
| Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | | | | |
| At least one of the debtors and a | inother | | Student loans Obligations arising out of a separation agreement or diverse that | |
| Check if this claim is for a co | ammunity debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | uninty ucul | | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offset? | | | ✓ Other Specify Personal Credit Card Purchase | |
| ₩ No Yes | | | | |
| A marriage Company Com | k-Configent bessets had all place hoolty and ly visions an vision takes. | t velikkan t velikkolovým francovým tiční sakelym velikálovým indovém vytokom z v | tanian phintonism consequences are consequenced and the consequences are consequenced and the consequences are consequenced and the consequences are consequenced as the consequences are consequences are consequenced as the consequenc | \$_1,314.00 |
| American Express Nonpriority Creditor's Name | | | Last 4 digits of account number | |
| P.O. BOX 981537 | | | When was the debt incurred? 01/22/2015 | |
| EL PASO | TX | 79998 | As of the date you file, the claim is: Check all that apply. | |
| City | State | ZIP Code | Contingent | |
| Who incurred the debt? Check or | ie. | | Unliquidated | |
| Debtor 1 only | | | Disputed | |
| Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | | | | |
| At least one of the debtors and ar | nother | | Student loans Obligations arising out of a separation agreement or divorce that | |
| Check if this claim is for a co | mmunity debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | sumry dest | | Debts to pension or profit-sharing plans, and other similar debts | |
| s the claim subject to offset? | | | Other Specify Credit Card Purchases | |
| Z ÍNo | | | | |

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Tomorrow Debtor 1

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| 3000 | | |
|------|--|--|

Case number (#known)_

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

| ter listing any entries on thi | s page, number the | m beginning with | 4.4, followed by 4.5, and so forth. | | Total claim |
|---|--|---|--|--|------------------|
| - City of Unicago | | | Last 4 digits of account number | - | s 1,100.0 |
| Nonpriority Creditor's Name 121 N. LaSalle Street | | | When was the debt incurred? | 11/01/2017 | |
| Number Street Chicago | IL. | 60602 | As of the date you file, the claim | is: Check all that apply. | |
| Who incurred the debt? Che ✓ Debtor 1 onty ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors: ☐ Check if this claim is for the claim subject to offset ✓ No ☐ Yes | State eck one. and another r a community debt | ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecur Student loans Obligations arising out of a sepa you did not report as priority clair Debts to pension or profit-sharing Other. Specify Parking Tic | ration agreement or divorce that ms g plans, and other similar debts | |
| Mercy Health Care | t de Grand Berlin de Berlin de Berlin (Berlin de Berlin de Berlin de Berlin de Berlin de Berlin de Berlin de B | tied a viillelist (tallist) phalaight a far ann ann an an ann ann ann ann ann ann | Last 4 digits of account number | | \$ <u>518.00</u> |
| Nonpriority Creditor's Name 2500 N. Rock | ton Ave | | When was the debt incurred? | 01/01/2014 | |
| Number Street Pock Toy d | 77 | 61103 | As of the date you file, the claim | is: Check all that apply. | |
| City | State | ZIP Code | Contingent | | |
| Who incurred the debt? Che | eck one. | | Unliquidated Disputed | | |
| Debtor 1 only Debtor 2 only | | | Tors of MONDOLODITY | | |
| Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured Student loans | ed claim: | |
| At least one of the debtors a | and another | | Obligations arising out of a separ | ation agreement or divorce that | |
| Check if this claim is for | a community debt | | you did not report as priority clain Debts to pension or profit-sharing | | |
| Is the claim subject to offse No Yes | t? | | A Other, Specify Medical F | XII | |
| Fedlan Serve | ung | tine ta | Last 4 digits of account number | 8 6 0 Z | \$ 69,909 |
| POB (OOLO) | | | When was the debt incurred? | D4/01/15 | |
| HZIYYI SOUVU | PA | 17106 | As of the date you file, the claim | is: Check all that apply. | |
| tify | State | ZIP Code | Contingent Unliquidated | | |
| Who incurred the debt? Che | ck one. | | Unliquidated Disputed | | |
| Debtor 1 only Debtor 2 only | | | Tone of MONROLOGICA | | |
| Debtor 2 only Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecure | ed claim: | |
| At least one of the debtors a | nd another | | Student loans Obligations arising out of a separa | ation agreement or divorce that | |
| Check if this claim is for | a community debt | | you did not report as priority claim | as . | |
| Is the claim subject to offset | t? | | Debts to pension or profit-sharing Other. Specify | pians, and other similar debts | |
| No Yes | | | 1 | | |

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Debtor 1

Delores First Name

Tomorrow

Document

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Case number (# known)_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

| · · · · · · · · · · · · · · · · · · · | paye, number then | ıı peginning wit | h 4.4, followed by 4.5, and so fort | N. HERENO BARRAS | Total claim |
|--|--|---|---|---|----------------|
| Chase Credit Card | Checking Accor | unt | Last 4 digits of account num | ber | s |
| P.O. BOX 15298 | | | When was the debt incurred | ? 11/22/2014 | • |
| Number Street WILMINGTON | DE | 19850 | As of the date you file, the ci | aim is: Check all that apply. | |
| City | State | ZIP Code | Contingent | | |
| Who incurred the debt? Chec | ck one. | | ✓ Unliquidated ☐ Disputed | | |
| Debtor 1 only | | | ☐ Disputed | | |
| Debtor 2 only | | | Type of NONPRIORITY unse | ecured claim: | |
| Debtor 1 and Debtor 2 only At least one of the debtors ar | nd another | | Student loans | | |
| ☐ Check if this claim is for | | | Obligations arising out of a s you did not report as priority | eparation agreement or divorce that claims | |
| Is the claim subject to offset | - | | Debte to pageion or profit ob | oring plans, and albert similar dallar | ا تامه |
| No | r | | Other, Specify Personal | Credit Purchases +Ch | ecking Account |
| Yes | | | | | Ü |
| and instrumental process and a security of the | irretti det til deligibi et deligibili per largaren de respersore di bers en elemente esta persona esta person En | l nachlachta d'I antillarig Làir Ghaeill, mòr ann ann an t-òr Cart Làireall, ar | Last 4 digits of account num | ontanki da demon nepere an nemismi den erece instituen eta aktisirja jegopi en sinjure, artis esta diseksiasia | + 6 E00 00 |
| Avant Nonpriority Creditor's Name | | | Last + digits of account num | | \$_6,522.00 |
| 222 N. LASALLE ST S | UITE 1700 | | When was the debt incurred? | 01/06/2016 | |
| Number Street CHICAGO | IL | 60601 | As of the date you file, the cl | aim is: Check all that apply. | |
| City | State | ZIP Code | Contingent | | |
| Who incurred the debt? Chec | k one | | ✓ Unliquidated | | |
| Debtor 1 only | it one. | | ☐ Disputed | | |
| Debtor 2 only | | | Type of NONPRIORITY unse | cured claim: | |
| Debtor 1 and Debtor 2 only | | | ☐ Student loans | | |
| At least one of the debtors an | | | Obligations arising out of a se | eparation agreement or divorce that | |
| Check if this claim is for a | community debt | | you did not report as priority of Debts to pension or profit-sha | claims aring plans, and other similar debts | |
| is the claim subject to offset | ? | | Other Specify Personal | Credit Card Purchase | |
| ₩ No Yes | | | | | |
| | A Land Mark Mark Mark Mark Mark Mark Mark Mark | | Last 4 digits of account number | y minintegra en la major en minima, en en major en partir de partir de la major en entre en entre en entre en e En entre en | \$ 1909.00 |
| Bank of America CC & | One king he | 20W17 | Last 4 digits of account number | <u> </u> | - 1 |
| 100 N. Tryon & | truct | | When was the debt incurred? | <u> </u> | |
| Charlotte | Nr. a | 18255 | As of the date you file, the cla | im is: Check all that apply. | |
| City | State | ZIP Code | Contingent | | |
| Who incurred the debt? Check | k one. | | ✓ Unliquidated☐ Disputed | | |
| Debtor 1 only | | | · | | |
| Debtor 2 only Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unser | cured claim: | |
| At least one of the debtors an | d another | | Student loans | | |
| ☐ Check if this claim is for a | | | Obligations arising out of a se you did not report as priority of | paration agreement or divorce that laims | |
| | - | | Debts to pension or profit-sha | ring plans, and other similar debts | |
| is the claim subject to offset? No | • | | Other, Specify Credit Ca | rd Purchases | |
| Yes | | | | | |

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Desc Main

Debtor 1

Delores First Name Tomorrow

Document Balogun

Case number (if known)

Part 3:

List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

| HARRIS & HARRI | S | ************************************** | On which entry in Part 1 or Part 2 did you list the original creditor? |
|---|--|---|--|
| 111 WEST JACKS Number Street | ON SUITE 400 | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Chicago City | IL State | 60604 ZIP Code | Last 4 digits of account number |
| SB Inv | estigation S |) | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| City | State State | ZIP Code | Last 4 digits of account number |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| City | State | ZIP Code | Last 4 digits of account number |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| City | State | ZIP Code | Last 4 digits of account number |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| City 0760imisma aasi-amammaayap776-ali-enrelapanothi alitaannii ja | State | ZIP Code | Last 4 digits of account number |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| City The state of | State *********************************** | ZIP Code | Last 4 digits of account number |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street | | *************************************** | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| City | State | ZIP Code | Last 4 digits of account number |

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Debtor 1

Delores

Tomorrow

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Case number (# known)_

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | | Total claim |
|--------------|-----|---|-----|-------------|
| Total claims | 6a. | Domestic support obligations | 6a. | \$ |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 13,000 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | + \$ |
| | 6e. | Total. Add lines 6a through 6d. | 6e. | s 13,000 |
| | | | | Total claim |
| Total claims | 6f. | Student loans | 6f. | , 69,909 |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ |
| 人名英格兰 | CI. | Probable to the second | | |

- Tot froi
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

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| Fill in this | information to id | lentify your case: | | er en | | |
|-----------------------------|--|--|--|---|--|--|
| Debtor | Delores | Tomorrow | Balogun | | | |
| | First Name | Middle Name | Last Name | ···· | yaw. | |
| ebtor 2 Spouse If filing |) First Name | Middle Name | Last Name | | | |
| nited States | Bankruptcy Court f | for the: Northern District of | Illinois | ₹ | | |
| Case number | • | | | Entraportific | | _ |
| (if known) | | | | | | Check if this is a amended filing |
| | | | | | | |
| fficial | Form 106 | G | | | | |
| ched | ule G: E | xecutory Co | ntracts a | nd U | nexpired Leases | 40/45 |
| | | | | | | 12/15 |
| ormation. | If more space is | needed, copy the additional name and case number | ional page, fill it o | ut, number | er, both are equally responsible for the entries, and attach it to this pa | supplying correct age. On the top of any |
| | | | , | | | |
| | | ory contracts or unexpir | | | | |
| Mai No. (| Sheck this box an Fill in all of the in | d file this form with the co | urt with your other | schedules. | You have nothing else to report on the | nis form. |
| | | | | | d on Schedule A/B: Property (Official | |
| List sepa example | arately each pers | son or company with whase, cell phone). See the | iom you have the | contract or | r lease. Then state what each contr e instruction booklet for more exampl | ract or lease is for (for |
| unexpire | d leases. | ,, p.1-1.2/1 000 u.k | | 3 101111 111 (11 | e instruction booklet for more example | les of executory contracts an |
| entre de | Standad standa | ing a second contract to the second con- | authorna a talla | | n de la companya della companya della companya de la companya della companya dell | |
| Person o | or company with | whom you have the co | ntract or lease | | State what the contract or lease | and the same of th |
| | | | initiact of lease | | State what the contract of least |) is for |
| 1. | | | | | | |
| Name | *************************************** | | | | | |
| 51. combosos | Ctt | ···· | | | | |
| Number | Street | | | | | |
| City | | State ZIP Code | | | | |
| 2 | | 17 m o 1 fra 1 | and the entitle front and the control of the contro | Antonio e e e e e e e e e e e e e e e e e e e | сти и почения при типи почения дення на при устройня в почения и почения установания в при в постройниция. | a milatin estimbat etelepere estitat tat alipere, illepungabat est, element estimbat istimo, v |
| Name | · · · · · · · · · · · · · · · · · · · | | | | | |
| | | | | | | |
| Number | Street | | | | | |
| City | | State ZIP Code | | | | |
| 3. | | | | | | erden der er eine eit deutsche das eine er er eine der de titte der de Bereiche der der der der eine der deutsche des eine der der eine der deutsche des eine der deutsche des eine der deutsche deutsche des eines der deutsche deu |
| Name | · | | | | | |
| Mumban | Chr4 | | | | Other consists in particle constitution against the stage one. | erres artiste et trastas esta esta de la selación de la telesta de la selación de la selación de la selación d |
| Number | Street | | | | | |
| City | | State ZIP Code | | | | |
| 4 | | | | | | e deleterable de esta de la trasta de la comencia de mendente que en proposición de la delete de colony de proposic |
| Name | | | | | | |
| Mumbor | Piroci | | | *************************************** | | |
| Number | Street | | | | | |
| City | . Newscare and the second section of the section of the second section of the se | State ZIP Code | | | | |
| 5 | | | | | e en | es de describer de la companya de l La companya de la co |
| Name | | | | | | |
| | | | | | | |
| Number | Street | | | | | |
| City | Water the transfer of the tran | State ZIP Code | | | | |

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| Fill in this | information to ic | lentify your case: | | | |
|------------------------------|--|--|--|--|---|
| Debtor 1 | Delores | Tomorrow | Balogun | | |
| Debtor 2 | First Name | Middle Name | Last Name | - | |
| | ng) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court t | for the: Northern District of Illinoi | s | | |
| Case number | er | | | | |
| (II III OHI) | | *** | | | Check if this is a amended filing |
| Official | Form 106 | L | | | antended ming |
| | | | | | |
| | | our Codebtors | | | 12/15 |
| ire filing to: ind number | gether, both are or r the entries in th | equally responsible for supply | ving correct information | Be as complete and accurate as post If more space is needed, copy the A page. On the top of any Additional F | dditional Dago fill it and |
| 1. Do you | have any codebt | ors? (If you are filing a joint cas | se, do not list either soous | e as a codebtor) | *************************************** |
| No No | • | , , , | , · · · · · · · · | o do d doddbiot., | |
| Yes | ; | | | | |
| 2. Within | the last 8 years, I | have you lived in a community | y property state or territ | ory? (Community property states and to | rritories include |
| | Go to line 3. | , Louisiana, Nevada, New Mexi | co, Pueno Rico, Texas, V | vashington, and Wisconsin.) | |
| | | former spouse, or legal equiva | lent live with you at the til | ne? | |
| | | Torritor opposed, or regular equire | tork ave war you at the til | ric: | |
| | | munity state or territory did you | live? | Fill in the name and current addres | e of that namen |
| | | | | . The free hame and caren address | s of that person. |
| | Name of your spouse, t | former spouse, or legal equivalent | | | |
| | | | | | |
| | Number Street | | | | |
| | City | | | reference as | |
| | - | State | ZIP Code | | |
| 3. In Colur | mn 1, list all of yo | ur codebtors. Do not include | your spouse as a codel | otor if your spouse is filing with you. | List the person |
| Snown Schedu | ın ıine z again as ile D (Official Fori | a codebtor only it that perso m 106D). <i>Schedule E/F (Off</i> ici | n is a guarantor or cosig al Form 106F/F), or Sch | ner. Make sure you have listed the c edule G (Official Form 106G). Use Sci | reditor on |
| Schedu | le E/F, or Schedu | ule G to fill out Column 2. | ar 1 01111 100 E11), 01 00 11 | some G (Official Form 100G). Use Sci | redate D, |
| Colum | л 1: Your codebto | | Nata Binis Na Babina | | |
| Colum | // /. Tour codebit | | | Column 2: The creditor to w | hom you owe the debt |
| | | | | Check all schedules that ap | y: Angling and States |
| 3.1 | | | | Schedule D, line | |
| Name | | | | ☐ Schedule E/F, line | |
| Number | r Street | *************************************** | | Schedule G, line | |
| City | | State | ZIP Code | | • |
| 2 | | | Zii Çode | | |
| Name | | | | | _ |
| | | | | ☐ Schedule E/F, line | |
| Number | r Street | *************************************** | | ☐ Schedule G, line | • |
| City | | State | ZIP Code | T TANNON Alleston | |
| .3 | | | | | |
| Name | | | | Schedule D, line | |
| Niconbean | Street | | | Schedule E/F, line | |
| Number | Street | | | ☐ Schedule G, line | • |
| City | | State | ZIP Code | *************************************** | |

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| Fill in this information to identi | fy your case: | | | | | |
|---|---|---------------------------------------|---------------|---|---|------------------------------------|
| Debtor 1 Delores | Tomorrow Ba | alogun | | | | |
| First Name | Middle Name | Last Name | | | | |
| Debtor 2 (Spouse, if filing) First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the | e: Northern District of Illinois | · [• | | | | |
| Case number (If known) | | | | Check if | this is: | |
| (I) Allowing | | | | | mended filing | |
| NE | | | | A sup incom | oplement showing ne as of the follow | postpetition chapter 13 ring date: |
| Official Form 106I | | | | MM / | DD / YYYY | |
| Schedule I: Yo | ur Income | | | | | 12/15 |
| upplying correct information. If you are separated and your spenarate sheet to this form. On the part 1: Describe Employ Fill in your employment | ouse is not filing with you he top of any additional p | i. do not include i | nformation at | mut vour en | niiea. If mara enac | a is panded attack a |
| information. | | Debtor 1 | | | Debtor 2 or n | on-filing spouse |
| If you have more than one job, attach a separate page with information about additional employers. | Employment status | ≝ Employed ☐ Not emplo | | | ☐ Employed | |
| include part-time, seasonal, or self-employed work. | | | | | · | |
| Occupation may include studen or homemaker, if it applies. | Occupation | | | | etation | |
| | Employer's name | | | | | |
| | Employer's address | Number Street | t | | Number Street | |
| | | | | | | |
| | | City | State ZIP | Code | City | State ZIP Code |
| | How long employed the | ere? | | | | |
| Part 2: Give Details Abou | it Monthly Income | | | *************************************** | | |
| Estimate monthly income as of spouse unless you are separated if you or your non-filing spouse helow. If you need more space, a | a. nave more than one emolov | er, combine the inf | | | | • |
| | | | For | Debtor 1 | For Debtor 2 or non-filing spou | |
| List monthly gross wages, sa deductions). If not paid monthly | lary, and commissions (b , calculate what the monthly | efore all payroll y wage would be. | 2. \$ | 1,500.00 | \$ | |
| Estimate and list monthly ove | ertime pay. | | 3. +\$ | | + \$ | |
| | | | | · | <u> </u> | |

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|-----------------------|-------------------|-------------------|---------|--|-----------|
| Delores First Name | To Middle Name | OMOTOW Last No | Balogun | Case number (if known) | |

| | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
|---|------------------|---|-----------------------------------|----------------|
| Copy line 4 here | → 4. | \$1,500.00 | \$ | |
| 5. List all payroll deductions: | | | - | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | · \$ | \$ | |
| 5b. Mandatory contributions for retirement plans | 5b. | | \$ | |
| 5c. Voluntary contributions for retirement plans | 5c. | | \$ | |
| 5d. Required repayments of retirement fund loans | 5d. | | \$ | |
| 5e. Insurance | 5e. | | \$ | |
| 5f. Domestic support obligations | 5f. | \$ | \$ | |
| 5g. Union dues | 5g. | \$ | \$ | |
| 5h. Other deductions. Specify: | 5h. | + \$ | + \$ | |
| 6. Add the payroli deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. | 6. | \$ | \$ | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$1,500.00 | \$ | |
| 8. List all other income regularly received: | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | \$ | |
| 8b. Interest and dividends | 8b. | \$ | \$ | |
| 8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive | nt | T | V | |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | \$ | |
| 8d. Unemployment compensation | 8d. | \$ | \$ | |
| 8e. Social Security | 8e. | \$ | \$ | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | | | | |
| Specify: | 8f. | \$ | \$ | |
| 8g. Pension or retirement income | 8g. | \$ | \$ | i |
| 8h. Other monthly income. Specify: | 8h. | +\$ | +\$ | |
| 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$ 0.00 | \$ | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$1,500.00 + | \$= | \$ |
| 11. State all other regular contributions to the expenses that you list in Schedulinclude contributions from an unmarried partner, members of your household, you friends or relatives. | our de | ependents, your room | | |
| Do not include any amounts already included in lines 2-10 or amounts that are n Specify: | ot av | ailable to pay expense | es listed in Schedule J. | \$ |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The re Write that amount on the Summary of Your Assets and Liabilities and Certain States | esult atistic | is the combined montl cal Information, if it app | hly income. olies 12. | \$1,500.00 |
| 13. Do you expect an increase or decrease within the year after you file this fo | rm? | | | monthly income |
| Yes. Explain: | | | | |

Debtor 1

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| Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every quested to the form. On the top of any additional pages, write your name and case number (if known). Answer every quested to the form. On the top of any additional pages, write your name and case number (if known). Answer every quested to the top of any additional pages, write your name and case number (if known). Answer every quested to the top of any additional pages, write your name and case number (if known). Answer every quested to the top of any additional pages, write your name and case number (if known). Answer every quested to the top of the top of any additional pages, write your name and case number (if known). Answer every quested to the top of the form to the top of the form and pages. Set No. Go to line 2. | Fill in this information to identif | y your case: | | | |
|--|---|---|---|---|-------------------------------------|
| Deport 2 Coccess Efficiency Symbols Northern District of Binols Supplement showing postpetition chapter 1 Expenses as of the following date: NM 7 DD 7 YYYY | | | 01 1 170 | | |
| A applement showing postpetition chapter 1 A applement showing postpetition showing postpetition showing postpetition showing postpetition showing postpetition showing postpetition showing postpeti | | Middle Name Last Name | | | |
| Conficial Form 106J Schedule J: Your Expenses 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, stack another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household Is this a joint case? Who Go to line 2. Who Describe Your Household? Who Go to line 2. Who Go to line 2. Who Go to line 2. Who Describe Your bousehold? Who Describe Your bousehold? Who Describe Your boundary or the form 1061-2. Expenses for Separate Household of Debtor 2. Do not list Debtor 1 and Yes, Fall out this information for Dependent's additionally to Debtor 2. Do not slate the dependents' Who Describe Your Appenses include expenses include expenses include expenses include expenses include expenses of people other than yourself and your dependents? Who Describe Yes Who | | Middle Name Last Name | E | - | |
| Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No. Go to line 2. Yes. Debtor 2 must file Official Form 106J-2. Expenses for Separate Household of Debtor 2. Do you have dependents? Do not list Debtor 1 and each dependent. Do not list Debtor 1 and each dependent. Do your expenses include expenses include expenses for Separate Household of Debtor 2. Do your expenses include expenses as of your bankruptcy lifting date unless you are using this form as a supplement in a Chapter 13 case to report. Appears and the after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the expenses substance and have included it on Schedule F. Your Income (Official Form 106J) Your expenses as 1. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: A Real estate taxes A Real | United States Bankruptcy Court for the | Northern District of Illinois | | | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1 | | | | www | ig date. |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1 | | | | | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: | Official Form 106J | _ | | | |
| information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case numbe (if known). Answer every question. Part 1: Describe Your Household Is this a joint case? No. Go to line 2. Yes. Doss Debtor 2 live in a separate household? No. Go to line 2. Yes. Doss Debtor 2 must file Official Form 106J-2. Expenses for Separate Household of Debtor 2. Do part 1: Describe Your Household Dependent's Person Debtor 2 must file Official Form 106J-2. Expenses for Separate Household of Debtor 2. Do you have dependents? Do not list Debtor 1 and Debtor 2 must file Official Form 106J-2. Expenses for Separate Household of Debtor 2. Do not state the dependents' names. Do not state the dependents' names. Do your expenses include expenses include and your dependents? No Yes No No Yes No No Yes No No Yes Setimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Set and a date after the bankruptcy if liling date unless you are using this form as a supplement in a Chapter 12 case to report. Supplicable date. Include expenses paid for with non-cash government assistance if you know the value of the form and fill in the happlicable date. The rental or home ownership expenses for your residence, include first mortgage payments and any rent for the ground or lot. If not included in line 4: A Real estate taxes A Real estate taxes A Re | Schedule J: Yo | ur Expenses | | | 12/15 |
| Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Does Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? W No. Does not list Debtor 1 and Yes. Fill out this information for each dependent. Does not list Debtor 2 Yes. Fill out this information for each dependent. Does not state the dependents' names. No. Yes. No. | information. If more space is need (if known). Answer every question | led, attach another sheet to this form I. | ng together, both are equally r n. On the top of any additional p | esponsible for suppl pages, write your nat | ying correct ne and case number |
| No So to line 2. Yes. Does Debtor 2 live in a separate household? No No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? W No Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do not list Debtor 1 and Debtor 2 Yes. Fill out this information for each dependent. Petroperty Petrop | | | | | |
| Yes. Does Debtor 2 live in a separate household? No | - | | | | |
| No Yes. Debtor 2 must file Official Form 106.1-2, Expenses for Separate Household of Debtor 2. Do you have dependents? | | separate household? | | | |
| Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? | | • | | | |
| Do not list Debtor 1 and | | le Official Form 106J-2, Expenses for S | eparate Household of Debtor 2. | | |
| Do not list Debtor 1 and Pets 2 age with you? Debtor 3 or Debtor 2 age with you? Debtor 3 or Debtor 4 or Debtor 5 age with you? Debtor 4 or Debtor 5 age with you? Debtor 5 or Debtor 6 age and be a general age with you? Debtor 6 or Debtor 6 age and be a general age with you? Debtor 7 or Debtor 9 age with you? Debtor 1 or Debtor 2 age with you? No Yes No No Yes No Yes No Yes No Yes Do your expenses include expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Satinate Your Ongoing Monthly Expenses Satinate Your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) Your expenses 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. S | 2. Do you have dependents? | ☑ No | ann an na tha ann an t-aire | | |
| Do your expenses include expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of expenses paid for with non-cash government assistance if you know the value of expenses and have included it on Schedule I: Your Income (Official Form 106L) The rental or home ownership expenses for your residence, include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. S. 4d. Home maintenance, repair, and upkeep expenses | | Yes. Fill out this information for | | | Does dependent live with you? |
| Do your expenses include expenses of people other than yourself and your dependents? No | • | · | | ** <u></u> | |
| Do your expenses include expenses of people other than yourself and your dependents? No | | | | | |
| Do your expenses include expenses of people other than yourself and your dependents? Do your expenses include expenses of people other than yourself and your dependents? No Yes | | | *************************************** | | |
| Do your expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy lift light date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ Property, homeowner's, or renter's insurance 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses | | | | | ☐ No |
| Do your expenses include expenses of people other than yourself and your dependents? Setimate Your Ongoing Monthly Expenses | | | | | ☐ Yes |
| Do your expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses | | | | _ | |
| Do your expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 500.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses | | | | | |
| Do your expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses | | | | | |
| Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. S | | | | | TES |
| Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. S | ant 2: Estimate Your Open | no Monthly Evnance | | | |
| expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's passistion as analyzing the first. | | | | | |
| A Real estate taxes 4. Property, homeowner's, or renter's insurance 4. Homeowner's responses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) Your expenses Your expenses Your expenses 4. \$ 500.00 4. \$ 500.00 | expenses as of a date after the bar | r bankruptcy filing date unless you as kruptcy is filed. If this is a suppleme | re using this form as a supplen ntal Schedule J, check the box | nent in a Chapter 13 of the form | case to report n and fill in the |
| 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's passesiction or condensition due to the service of th | • • | -cash novernment assistance if you | know the value of | | |
| any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's passagisfier or sandersision due | | | | Your expe | nses |
| If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Lomographic responses for paragraphic and upkeep expenses | | expenses for your residence. Include | first mortgage payments and | ************************************** | 500.00 |
| 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's respectation or condensition of the | If not included in line 4: | | | | |
| 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's passeciation or condensition of an administration of the second of th | 4a. Real estate taxes | | | 4a. \$ | |
| 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 4d. Homeowner's respectation or condensition of use | 4b. Property, homeowner's, or re | enter's insurance | | | |
| 1d Hamagunar's respectation of sandamining during | 4c. Home maintenance, repair, | and upkeep expenses | | - | |
| | 4d. Homeowner's association or | condominium dues | | 4d. \$ | |

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Debtor 1 Delores Tomorrow Balogun Case number (if known)_____

| | | | Your expenses |
|-----|---|--------------|---------------|
| 5 | Additional mortgage payments for your residence, such as home equity loans | 5. | \$ |
| 6 | . Utilities: | | |
| | 6a. Electricity, heat, natural gas | 6a. | \$ |
| | 6b. Water, sewer, garbage collection | 6b. | \$ |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$125.00 |
| | 6d. Other Specify: | 6d. | \$ |
| 7 | | 7. | \$ 200.00 |
| 8. | Childcare and children's education costs | 8. | \$ |
| 9. | Clothing, laundry, and dry cleaning | 9. | s 150,00e |
| 10. | Personal care products and services | 10. | s 50.00 |
| 11. | Medical and dental expenses | 11. | \$ |
| 12. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$ |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ |
| 14. | Charitable contributions and religious donations | 14. | \$ |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a. | \$ |
| | 15b. Health insurance | 15b. | \$ |
| | 15c. Vehicle insurance | 15c. | \$ |
| | 15d. Other insurance. Specify: | 15d. | \$ |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | \$ |
| 17. | Installment or lease payments: | | |
| | 17a. Car payments for Vehicle 1 | 17a. | s 750 |
| | 17b. Car payments for Vehicle 2 | 17b. | \$ |
| | 17c. Other. Specify: | 17c. | \$ |
| | 17d. Other, Specify: | 17d. | *** |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ |
| 19. | Other payments you make to support others who do not live with you. | | |
| | Specify: | 19. | \$ |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income | φ. | |
| | 20a. Mortgages on other property | 20a. | \$ |
| | 20b. Real estate taxes | 20a. 20b. | |
| | 20c. Property, homeowner's, or renter's insurance | 20b. 20c. | \$ \$ |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ |
| | 20e. Homeowner's association or condominium dues | 20e. | \$ |

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| Debtor 1 | Delores First Name | Tomorrow Middle Name Last Name | Balogun | Case number (#known) | |
|-------------------|-----------------------|---|--|----------------------|-----------------------|
| 21. Oth | er. Specify: | | The Market State of the State o | 21 | +\$ |
| | culate your mont | | | 22a. | 1625 |
| 22b | . Copy line 22 (mo | onthly expenses for Debtor 2) 1 22b. The result is your month | - | | s 0 |
| 23. Calc ı | ulate your month | nly net income. | | | |
| 23a. 23b. | Copy line 12 (yo | our combined monthly income | | 23a . | \$ 1500 1626 0D |
| 23c. | Subtract your me | hly expenses from line 22c ab onthly expenses from your mo or monthly net income. | | 23b. 23c. | -s 1695.00 s - 185 |
| For e | xample, do you e | rease or decrease in your expect to finish paying for your ncrease or decrease because | car loan within the year or d | o you expect your | |
| ∑X No □ Ye | es. Explain he | | | | |
| | | | | | |

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| | 200amone rago do ordo | |
|---|---|---------------------------------|
| ill in this information to identify your case: | | |
| Pebtor 1 Delives Tomoviow & | zuloyun | |
| ebtor 2 | Last Name | |
| ouse, if filing) First Name Middle Name | Last Name | |
| ited States Bankruptcy Court for the: North Distric | ct of 11 Indi 5 | |
| known) | | |
| | | Check if this is amended filing |
| | | amonded ming |
| Official Form 106Dec | | |
| Declaration About an | Individual Debtor's Schedules | |
| | | 12/15 |
| | equally responsible for supplying correct information. | |
| ou must file this form whenever you file bankrup | otcy schedules or amended schedules. Making a false statement, concealing | property, or |
| potaining money or property by fraud in connection | on with a bankruptcy case can result in fines up to \$250,000, or imprisonmen | nt for up to 20 |
| rears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3 | 571. | • |
| | | |
| · · · · · · · · · · · · · · · · · · · | | |
| Sign Below | | |
| | | |
| | | |
| Did you pay or agree to pay someone who is N | OT an attorney to help you fill out bankruptcy forms? | |
| A No | | |
| ☐ Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, | |
| | Signature (Official Form 119). | and |
| | | and |
| Under penalty of perjury, I declare that I have re | ead the summary and schedules filed with this declaration and | and |
| Under penalty of perjury, I declare that I have re that they are true and correct. | ead the summary and schedules filed with this declaration and | and |
| Under penalty of perjury, I declare that I have rethat they are true and correct. | ead the summary and schedules filed with this declaration and | and |
| Under penalty of perjury, I declare that I have re that they are true and correct. | | and |
| and they are true and correct. | ead the summary and schedules filed with this declaration and | and |
| Under penalty of perjury, I declare that I have re that they are true and correct. Signature of Debtor | | and |
| A COPPECT. | * | and |
| That they are true and correct. | * | |

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| Debtor 1 | Delor | es | Tomorr | ow | Ba | alogun | | | | | | |
|--|-----------------------|--------------------------|----------------------------------|---|--|---------------------------|--|------------------------|--------------|----------------|---|---|
| | First Nam | e | | e Name | | ast Name | *************************************** | | | | | |
| ebtor 2 pouse, if fili | ig) First Nam | e | Midd | e Name | L | ast Name | | | | | | |
| nited State | s Bankrupt | cy Court for | the: Norther | n District of III | inois | | lacksquare | | | | | |
| ase numbe known) | er | | - | *************************************** | | | | | | | | ata se da ta ta |
| | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | ck if this is a nded filing |
| | | | | | | | | | | | | |
| fficial | Form | 107 | | | | | | | | | | |
| | | | | A.S. | - | | _= | **** | | | | |
| | | | | | | | - | | | nkrupt | | 04/ |
| as comp | iete and | accurate a | s possible. | If two marrie | d peopl | le are filir | ng together, I | ooth are equ | ally respon | sible for supp | lying corre | ect |
| rmation. nber (if k | ार more nown). A | space is n inswer eve | eeded, atta ry question | ch a separat L | e sheet 1 | to this fo | rm. On the to | op of any ad | ditional pag | es, write you | r name and | i case |
| | | | ry quoonon | • | | | | | | | | |
| art 1: | Give De | tails Abo | ut Your M | arital State | ıs and | Where \ | ou Lived B | efore | | | | |
| | ···· | | | | | | | | | | | |
| What is | your cur | rent marita | al status? | | | | | | | | | |
| ☐ Mar | - | | | | | | | | | | | |
| E74 | | | | | | | | | | | | |
| ✓ Not | married | | | | | | | | | | | |
| | | | | | | | | | | | | |
| During t | | years, hav | /e you lived | anywhere o | ther tha | n where y | you live now | ? | | | | |
| During to | he last 3 | | | | | | | | | | | |
| During to | he last 3 | | | | | | you live now e where you l | | | | | |
| During to No | he last 3 | | | | ars. Do | not includ | e where you l | ive now. | | MARKA | | es Debtor 2 |
| During to No | the last 3 | | | | ars. Do | not includ | e where you l | ive now. | | | | es Debtor 2 d there |
| During to No | the last 3 | | | | ars. Do | not includ | e where you l | ive now. | | | live | |
| During to No Yes | he last 3 List all or | f the places | | | ars. Do | not includ | e where you l | ive now. | | | live | d there ame as Debtor |
| During to No Yes | he last 3 List all or | | | | Dates lived ti | not includ | e where you l | ive now. | | | live □ s: _ Fi | d there ame as Debtor |
| During to No Yes | he last 3 List all or | f the places | | | Dates lived to | not includ | Debtor 2: | ive now. | | | live | d there ame as Debtor |
| During to No Yes | he last 3 List all or | f the places | | | Dates lived to | not includ | Debtor 2: | ive now. | | | live □ s: _ Fi | d there ame as Debtor |
| During to No Yes | List all or btor 1: | f the places | | the last 3 yes | Dates lived to | not includ | Debtor 2: | ive now. | State | ZIP Code | live □ s: _ Fi | d there ame as Debtor |
| During to No De | List all or btor 1: | f the places | s you lived in | the last 3 yes | Dates lived to | not includ | Debtor 2: Same as Number | ive now. | State | ZIP Code | live | d there ame as Debtor |
| During to No De | List all or btor 1: | f the places | s you lived in | the last 3 yes | Dates lived the | not includ | Debtor 2: Same as Number | Debtor 1 | State | ZIP Code | lived Salan I Salan I Salan ame as Debtor o ame as Debtor |
| During to No Pes | List all or btor 1: | f the places | s you lived in | the last 3 yes | Dates lived til | not includ | Debtor 2: Same as Number | Debtor 1 Street | State | ZIP Code | live | ame as Debtor rom ame as Debtor ame as Debtor |
| During to No Pes | List all or btor 1: | f the places | s you lived in | the last 3 yes | Dates lived the | not includ | Debtor 2: Same as Number City Same as | Debtor 1 Street | State | ZIP Code | lived Salan I Salan I Salan ame as Debtor rom ame as Debtor ame as Debtor |
| During to No Pes | List all or btor 1: | f the places | s you lived in | the last 3 yes | Dates lived til | not includ | Debtor 2: Same as Number City Same as | Debtor 1 Street | State | ZIP Code | live | ame as Debtor rom ame as Debtor ame as Debtor |
| During to No Yes | List all or btor 1: | f the places | s you lived in | i the last 3 ye | Dates lived til | not includ | Debtor 2: Same as Number City Same as | Debtor 1 Street | State | ZIP Code | live | ame as Debtor rom ame as Debtor ame as Debtor |
| During to No Yes De | List all or btor 1: | Street | s you lived in State Z | if P Code | Pates lived to the | not includ Debtor 1 here | Debtor 2: Same as Number City Same as Number | Debtor 1 Street Street | State | ZIP Code | live | ame as Debtor o ame as Debtor o ame as Debtor |
| During to No Yes De | List all or btor 1: | Street Street | s you lived in State Z State Z | if the last 3 yes | Pates lived to the | not includ Debtor 1 here | Debtor 2: Same as Number City City City | Debtor 1 Street Street | State | ZIP Code | live Ss. Fi Ti Communication I/Communication | ame as Debtor ame as Debtor ame as Debtor |
| During to No Yes De No Ci No Ci Within to states an | List all or btor 1: | Street Street | s you lived in State Z State Z | if the last 3 yes | Pates lived to the | not includ Debtor 1 here | Debtor 2: Same as Number City City City | Debtor 1 Street Street | State | ZIP Code | live Ss. Fi Ti Communication I/Communication | ame as Debtor ame as Debtor ame as Debtor |
| During to No De No | List all or btor 1: | Street Street years, did | State Z State Z you ever liv | if the last 3 yes | Pates lived til From To From To Louisia | not includ Debtor 1 here | Debtor 2: Same as Number City Same as Number City Valent in a cada, New Mexical | Debtor 1 Street Street | State | ZIP Code | live Ss. Fi Ti Communication I/Communication | ame as Debtor ame as Debtor ame as Debtor |

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| ebtor 1 | | Tomorrow | Balogun | Case nu | imber (if known) | |
|-------------|--|----------------|---|--|--|--|
| | First Name Middle Na | ame Lasi | t Name | | | |
| Fil If : | d you have any income for Il in the total amount of inco you are filing a joint case an | me you receive | ed from all jobs and all bus | inesses, including part-ti | r or the two previous cale me activities. er Debtor 1. | ndar years? |
| | Yes. Fill in the details. | | | | | |
| | | | Debtor 1 | | Debtor 2 Constitution designation | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply | Gross income (before deductions and exclusions) |
| | From January 1 of curr the date you filed for b | | Wages, commissions, bonuses, tips | \$6,000.00 | Wages, commissions, bonuses, tips | \$ |
| | | | ☐ Operating a business | | Operating a business | |
| | For last calendar year: (January 1 to December | 31,2017 | Wages, commissions, bonuses, tips Operating a business | \$27,000.00 | ☐ Wages, commissions, bonuses, tips☐ Operating a business | \$ |
| | | ŸŸŸŸ | — Operating a business | | Car Operating a business | |
| | For the calendar year b | efore that: | Wages, commissions, bonuses, tips | | Wages, commissions, | |
| | (January 1 to December | 31,) | Operating a business | \$ 43,000.00 | bonuses, tips Operating a business | \$ |
| Lis | t each source and the gros No | | | | ed together, list it only once you listed in line 4. | under Debtor 1. |
| | Yes. Fill in the details. | | Debtor 1 | | | |
| | | | | | Debtor 2 | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| | From January 1 of curr the date you filed for ba | | | \$. \$ | | \$ |
| | e e transieria andre angregaria y control de la transie de la control de | | | \$ | | \$ |
| | | | | Ø. | | |
| | For last calendar year: (January 1 to December | 31 2017 \ | | _ | | \$ |
| | (Samuely - to becomber | YYYY | | _ | | \$ |
| | For the calendar year b | efore that: | | \$ | | \$ |
| | (January 1 to December | 31,) | | | | \$ |
| | | | | | | |

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| Debtor 1 | Delo | | Tomorro | W Last Name | Balogun | | Case nur | mber (if known) | |
|-------------|-------------------------|---------------------------------------|--|-------------------------------------|---|------------------------------------|--------------|--|--|
| | | Table 1 | | Edd Name | | | | | |
| Part 3: | List | Certain Payn | nents Yo | u Made Bef | ore You Filed | for Bankrupto | y | | |
| | | | | | | | | | |
| 6. Are ei | ither De | ebtor 1's or Deb | tor 2's de | bts primarily | consumer debt | s? | | | |
| ☐ No | o. Neit "incl | ther Debtor 1 no urred by an indiv | or Debtor idual prim | 2 has primaril arily for a perso | y consumer del onal, family, or h | bts. Consumer d ousehold purpos | lebts are o | defined in 11 U.S.C. § 101(| 8) as |
| | Duri | ng the 90 days b | efore you | filed for bankr | uptcy, did you pa | y any creditor a | total of \$6 | 3,425* or more? | |
| | | No. Go to line 7. | | | | | | | |
| | | total amoun | it you paid | that creditor. I | Do not include pa | syments for dome | estic supp | more payments and the port obligations, such as | |
| | * C11 | | | | | | | s bankruptcy case. or the date of adjustment. | |
| rzt | | | | | | | on or ane | er the date of adjustment. | |
| ∠ Ye | | | | | y consumer det uptcy, did you pa | | total of CC | 200 | |
| | | | eioie you | med for parkit | иртсу, ото уот ра | y any creditor a t | iotai or \$0 | ou or more? | |
| | | No. Go to line 7. | | | | | | | |
| | 9 | creditor. Do | not includ | e payments fo | r domestic suppo | ort obligations, su | uch as ch | amount you paid that ild support and | |
| | | alimony. Als | so, do not | include payme | nts to an attorne | y for this bankrup | otcy case. | | |
| | | | | | Dates of payment | Total amount p | aid . | Amount you still owe | Was this payment for |
| | | Nissan Moto | r Accept | ance | 01/01/2018 | \$ | 700.00 | \$45,000.00 | ☐ Mortgage |
| | | Creditor's Name | | | | | | | ☑ Wortgage |
| | | POB 660366 Number Street |) | | *************************************** | | | | Credit card |
| | | | | | | | | | Loan repayment |
| | | Dellas | TV | 75000 | | | | | Suppliers or vendors |
| | | Dallas | TX State | 75266 ZIP Code | | | | | Other |
| | | | | | | | | | |
| | | | | - | | \$ | | \$ | ☐ Mortgage |
| | | Creditor's Name | | | | | | | ☐ Car |
| | | Number Street | | | * | | | | Credit card |
| | | | | | | | | | Loan repayment |
| | | | | | | | | | Suppliers or vendors |
| | | City | State | ZIP Code | | | | | Other |
| | | | | | | | | | |
| | | | | | | \$ | | \$ | ☐ Mortgage |
| | | Creditor's Name | | | | | | | ☐ Car |
| | | Number Street | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | | | | | Credit card |
| | | | | | | | | | Loan repayment |
| | | | | | | | | | Suppliers or vendors |
| | | City | State | ZiP Code | | | | | Other |
| | | , | Julio | ZIF CODE | | | | | Service Communication Communic |

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| Tribition 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? siders include your relatives: any general partners; relatives of any general partners; patherships of which you are a general partner; partnerships of which you sall was a general partner; partnerships of which you are a general partner; partnerships of which you sall payments for domestic support obligations, or has child support and alimony. To be a solid support and alimony. Dates of Total amount Amount you still Reason for this payment paid owe Tributor's Name Street Dates of Total amount Amount you still Reason for this payment paid insider? No Yes. List all payments that benefited an insider. Dates of Total amount Amount you still Reason for this payment insider. Dates of Total amount Amount you still Reason for this payment insider. S S S S S S S S S S S S S S S S S S S | 1 | Delores | Tomorrow | Balogun | _ | Case number (if known |) |
|--|--------------------------|---|--|---|---|---|--|
| sider's include your relatives, any general partners; relatives of any general partners; partnerships of which you are an general partners; partnerships of which you are a general partners; managers, or owner of 20 to your end of a my managing part. Include payments for domestic support obligations, others are a general partners; partnerships of which you still amount you still reason for this payment includers you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefit insider. No Yes. List all payments that benefited an insider. Dates of Total amount Amount you still reason for this payment paid owe include creditor's name. Dates of Total amount Amount you still reason for this payment include creditor's name. Total amount Amount you still reason for this payment include creditor's name. Supplement Street Str | | First Name | Middle Name Last Name | | • | | ************************************** |
| Dates of payment Dates of payment Amount you still Reason for this payment | side rpo ent ch | ers include your re trations of which y t, including one fo as child support a | elatives; any general partners you are an officer, director, pe or a business you operate as a and alimony. | ; relatives of any erson in control, o | general partners; por owner of 20% or i | partnerships of white more of their voting | ch you are a general partner; |
| City State ZIP Code S S S | Ye | es. List all payme | ents to an insider. | | | | Reason for this payment |
| City State ZIP Code S | ş | insider's Name | | | \$ | \$ | |
| Insider's Name Size S Number Street City State ZIP Code hin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefit insider? ude payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Paid owe Include creditor's name Insider's Name S S S Insider's Name | ì | Number Street | | | | | : |
| Insider's Name Size S Number Street City State ZIP Code hin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefit insider? ude payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Paid owe Include creditor's name Insider's Name S S S Insider's Name | - | | | | | | |
| Insider's Name Number Street City State ZIP Code Total amount Amount you still Reason for this payment payment Dates of payment paid owe Include creditor's name Insider's Name Street City State ZIP Code State ZIP Code Smint 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefit insider. No Yes. List all payments that benefited an insider. Dates of payment paid owe still Reason for this payment owe Include creditor's name Insider's Name Smint 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefit insider. No Yes. List all payments that benefited an insider. Dates of Total amount Amount you still Reason for this payment love owe Include creditor's name Insider's Name Smint 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefit insider. No Yes. List all payments that benefited an insider. Smount you still Reason for this payment love owe Insider's Name Smount you still Reason for this payment love owe Insider's Name | 7 | City | State ZIP Code | | | | |
| City State ZIP Code whin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefit insider? ude payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Amount you still reason for this payment include creditor's name Insider's Name S S Insider's Name S S Insider's Name | | | | | \$ | \$ | |
| nin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefinisider? ude payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Amount you still owe Include creditor's name Insider's Name Street City State ZIP Code \$ | • | Number Street | | | | | |
| hin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefit insider? Insider's Name No Yes. List all payments that benefited an insider. | ō | Sity | State ZIP Code | | | | |
| Insider's Name Street City State ZIP Code \$ Insider's Name | ins ludi No | ider? e payments on de | ebts guaranteed or cosigned t | by an insider. Dates of | Total amount | jarri kuman | and the second s |
| Number Street City State ZIP Code \$\$ | | | | payment | paid | owe | |
| City State ZIP Code \$\$ | In | nsider's Name | | | \$ | \$ | |
| Insider's Name | N | umber Street | | | | | |
| Insider's Name | C | ity | State ZIP Code | _ | | | |
| Insider's Name | | | | | \$ | \$ \$ | |
| Number Street | Īn | sider's Name | | | T | ************************************** | |
| | Ni | umber Street | | | | | |
| | 77 | h. | Ch | - | | | |

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| r 1 | Delores | Tomorrow | Balogun | Casa number (2) | |
|-------|-----------------------|--|--|--|--|
| | First Name | Middle Name Last Nam | | Case number (if known) | |
| | | | | | |
| ٠. | | | | | |
| t 4 | Identify Le | gal Actions, Reposse: | ssions, and Foreclosure | ∌s | |
| Vith | in 1 year before | you filed for bankruptcy | , were you a party in any la | wsuit, court action, or administ | rative proceeding? |
| ist a | ill such matters, i | ncluding personal injury ca | ases, small claims actions, d | livorces, collection suits, paternity | actions, support or custody modification |
| nd c | contract disputes. | | | and the second section, parenting | actions, support of custody modification |
| í N | - | | | | |
| _ | | | | | |
| J Y | es. Fill in the deta | ails. | And the second of the second | | |
| | | I | Nature of the case | Court or agency | Status of the case |
| | | | er de de la Carta de la deservação de la compansión de la compansión de la compansión de la compansión de la c La compansión de la compa | | |
| | Case title | | | · | Pending |
| , | Case alle | The state of the s | | Court Name | |
| | | | | | On appeal |
| | | | | Number Street | ☐ Concluded |
| | Case number | | | : : | |
| , | | | | City | 710 C |
| | | | | City State | ZIP Code |
| | | | | | |
| (| Case title | | | 0 | Pending |
| | | | | Court Name | |
| _ | | | | | On appeal |
| | | | | Number Street | Concluded |
| (| Case number | | | | |
| | | | | City State | ZIP Code |
| Υe | es. Fill in the infor | mation below. | | | |
| | | | 100 miles (100 miles) | | |
| | | | Describe the propert | X. : 사람들의 학생님 중요로 살았다 | Date Value of the property |
| | | | | | |
| | | | | | . \$ |
| | Creditor's Name | | | | 4 |
| | | | and the comment of the field of | . Na transport of the control of the | |
| | Number Street | V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V- | Explain what happen | ed Paragraphy (1964) | |
| | | | □ | | |
| | | | Property was re | • | |
| | | | Property was fo | | |
| | | | Property was g | arnished. | |
| | City | State ZIP Code | Property was a | ttached, seized, or levied. | |
| | | TO A STATE OF THE THE STATE OF | Describe the property | | |
| | | | Describe the property | | Date Value of the property |
| | | | | | |
| | | | | | \$ |
| | Creditor's Name | | ************************************** | in the second | Ψ |
| | | | | | |
| | Bironhaa | | | | |
| | Number Street | | Explain what happen | ed the State of the edge of th | |
| | | | · · · · · · · · · · · · · · · · · · · | | |
| | | | | | |
| | | | Property was re | | |
| | | 49 Park Marketon | | possessed. | |
| | | | Property was fo | epossessed. reclosed. | |
| | City | State ZIP Code | Property was fo | epossessed. reclosed. | |

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| or 1 | Delores First Name | Tomorrow Middle Name Last | Balogun Case | e number (if known) |
|------------|---------------------------------------|----------------------------|--|--|
| | Last Madie | Middle Name Lasi | Name | |
| | | | | |
| Wit | hin 90 days befo | ore you filed for bankru | ptcy, did any creditor, including a bank or fi | nancial institution, set off any amounts from your |
| acc | ounts or retuse | to make a payment be | cause you owed a debt? | |
| | No Yes. Fill in the de | .1.9 | | |
| | res. Fill in the de | etails. | | |
| | | | Describe the action the creditor took | Date action Amount |
| | Creditor's Name | | | was taken |
| | | | | |
| | Number Street | | • | \$ |
| | | | | |
| | | | - | |
| | | | | |
| | City | State ZIP Code | Last 4 digits of account number: XXXX | |
| | | | | |
| Nitt | nin 1 year before | you filed for bankrupt | cy, was any of your property in the possessi | ion of an assignee for the benefit of |
| Z i | | ppointed receiver, a cu | stodian, or another official? | |
| | | | | |
| ` الب | res | | | |
| | Link Coute: | | | |
| t 5: | List Certai | n Gifts and Contribu | tions | |
| | | | | |
| Vith | in 2 years befor | e you filed for bankrup | tcy, did you give any gifts with a total value o | of more than \$600 per person? |
| Ø 1 | No | | | The state of the s |
| 1 | es. Fill in the de | tails for each gift. | | |
| | | 3 | | |
| | | value of more than \$600 | Describe the gifts | Dates you gave Value |
| | per person | | | the gifts |
| | | | | |
| - | | | | • |
| ۲ | erson to Whom You G | Save the Gift | | Ψ |
| | | | | S |
| | | | | |
| N | umber Street | | | |
| | | | | |
| c | ity | State ZIP Code | | |
| | | | | |
| ٠ | erson's relationship | and you | | k paramen mandalah salama da sahik salah sahi sahi sa salah salah salah salah salah salah salah salah salah sa |
| , | | NACINA GA AGANAGA | and the second s | en de la composition della com |
| | er person | lue of more than \$600 | Describe the gifts | Dates you gave Value the gifts |
| | | | | in the state of the second sec |
| _ | | | | |
| Pe | erson to Whom You G | ave the Gift | | \$ |
| | | | | |
| | · · · · · · · · · · · · · · · · · · · | | | <u> </u> |
| | | | | |
| N | ımber Street | | | |
| | | | | |
| Ci | ty | State ZIP Code | | |
| _ | | | | |
| Pe | erson's relationship | to you | | |

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| 1 | Delores First Name | Tomorrow Middle Name La | Balogun sst Name | Case number (if known)_ | | |
|---------------|--|--|-------------------------------|--|--|------------------------|
| | | | | | | |
| /ithi | in 2 years before | you filed for bankru | ıptcy, did you give any gif | ts or contributions with a total valu | ie of more than s | 600 to any charity: |
| 1 N | | | | | 20 of more than t | ooo to any charity? |
| | | ails for each gift or cor | ntribution. | | | |
| | to A State of the | A CONTRACTOR OF THE SECTION OF THE S | gragative transportation | ing the state of the state of | en als de legeles des el | |
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| 6: | List Certain | Losses | | | | |
| h | Describe the proper now the loss occurr | rty you lost and red | Describe any insurance c | overage for the loss urance has paid. List pending insurance | Date of your loss | Value of property lost |
| | | | claims on line 33 of Schedu | ile A/B: Property. | | |
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| 4 | List Certain F | Payments or Tran | sfers | | | |
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| J C | onsulted about s | eeking bankruptcy | or preparing a bankruptcy | e acting on your behalf pay or transpetition? | ster any property | to anyone |
| lud | e any attomeys, b | ankruptcy petition pre | eparers, or credit counseling | agencies for services required in yo | ur bankruptcy. | |
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| Pe | erson Who Made the Pa | evment, if Not You | | | | |

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| | Delores First Name | Tomorrow Middle Name | Balogun | Case number (if known) | |
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| Vithi | n 10 vears befor | e vou filed for bankr | uptcy, did you transfer any prope | rhi to a colf cottled true | ož ovojenije vista f. | anda Yarka anana |
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| t 8: | List Certain F | Inancial Account | ts, instruments, Safe Deposit | Boxes, and Storag | e Units | |
| Vithir | n 1 year before y | ou filed for bankrup | tcy, were any financial accounts (| or instruments held in | VOUL name, or for your | henefit |
| lose | d, sold, moved, d | or transferred? | | | | |
| rcluc | de checking, sav | ings, money market | , or other financial accounts; cert | ificates of deposit; sha | ares in banks, credit ur | nions, |
| roke | erage houses, pe | nsion funds, cooper | ratives, associations, and other fi | nancial institutions. | • | |
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| Have 21 N | you stored prop | erty in a storage ur | nit or place other than you | ur home within 1 y | ear before you filed for bankrupto | y? |
| | es. Fill in the det | ails. | | | | |
| | | | Who else has or had a | ccess to it? | Describe the contents | Do you stil |
| | | | | | | have it? |
| | Life Storage | | | | Clothing, paperwork, com desk | puter 🔲 No |
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| art 9: | identify P | roperty You Hole | d or Control for Some | one Else | | |
| Do y | ou hold or contro | ol any property that | someone else owns? In | clude any property | you borrowed from, are storing f | O.T. |
| or no | old in trust for so | meone. | | arms any property | , you borrowed nom, are storing i | or, |
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| Шү | es. Fill in the det | ails. | | | | |
| | | | Where is the property? | | Describe the property | Value |
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| | First Name | Middle Name | e La | st Name | Oase number | 2: (I) Known) | ··· |
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| ve : | ou notified any | govern | mental unit | of any release of hazardous ma | terial? | | |
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| ve y | ou been a party | / in any j | judicial or a | dministrative proceeding under | any environmental I | aw? Include settlements and | orders |
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| hin | 4 years before ; A sole propriet | you filed or or sei | i for bankru if-emploved | ptcy, did you own a business or in a trade, profession, or other | have any of the follo | owing connections to any bus | iness? |
| Ø | A member of a | limited I | liahility com | pany (LLC) or limited liability pa | activity, either full-til | me or part-time | |
| ō | A partner in a p | artnersi | hin | pany (EEG) or minted nability pa | ruiersnip (LLP) | | |
| | | | | xecutive of a corporation | | | |
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| _ | All owner or at | least 5% | OT THE VOTIF | ng or equity securities of a corp | oration | | |
| | None of the ab | | | | | | |
| Yes | . Check all that | apply al | bove and fill | in the details below for each be | ısiness. | | |
| iG | low Mentorin | n | | Describe the nature of the busin | ess | Employer Identification number | |
| | siness Name | 9 | | | | Do not include Social Security n | umber or ITIN. |
| 31 | 27 S. Plymout | | *************************************** | Non Profit mentoring orga | anization for girls | | |
| | mber Street | <u> </u> | | | | EIN: 4 5 1 2 8 4 | 382 |
| | | | | Name of accountant or bookkee | oer | Dates business existed | Augustania. |
| | | | ······································ | | | | |
| CI | nicago | II | 60604 | | | From07/20/2011 To | |
| Cit | | State | ZIP Code | 1 | | | • |
| | | | | Describe the nature of the busine | ess | Employer Identification number | |
| Bu | siness Name | | | | 43/3 (44.55 V 1974) | Do not include Social Security no | umber or ITIN. |
| | | | | | 1 | • | |
| <u>*</u> | mber Street | | | s contrate transcent process, to contrate process, and contrate | | EIN: | |
| rvu | umei Sueet | | | Name of accountant or bookkeep | Der | Dates business existed | |
| | | | | | A ANALYSIA DE ANTON | | |
| | | | | | | _ | |
| | V | State | ZID Code | | 1 | From To | • |

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| Debtor 1 | Delores First Name | Tomorrow Middle Name Last i | Balogun | Case number (if known) |
|----------|-------------------------|--|--|---|
| | | mast (| vanie | |
| | | | Describe the nature of the busines: | s Employer Identification number Do not include Social Security number or ITIN. |
| | Business Name | | | EIN: |
| | Number Street | | Name of accountant or bookkeeper | Dates business existed |
| | City | State ZIP Code | | From To |
| 28. With | nin 2 vears before | YOU filed for hankrun | try did you give a financial eterra | ment to anyone about your business? Include all financial |
| insti | itutions, creditors | s, or other parties. | oy, ala you give a illiancial statell | ment to anyone about your business? Include all financial |
| | es. Fill in the de | tails below. | *************** | |
| | | | Date issued | |
| | Name | TOTAL PROPERTY OF THE PARTY OF | MM / DD / YYYY | |
| | Number Street | and the state of t | | |
| | - | - TOTAL MILITARY CONTRACTOR OF THE CONTRACTOR OF | | |
| | City | State ZiP Code | | |
| | | | | |
| Part 12 | Sign Below | , | | |
| and. | moia are tine diff | a Confect, i unium simin | INAL MAKING A TAICO CISTOMONT AA | hments, and I declare under penalty of perjury that the oncealing property, or obtaining money or property by fraud |
| 110 | Office Clott With a | bankruptcy case can i 1, 1519, and 3571. | result in fines up to \$250,000, or in | mprisonment for up to 20 years, or both. |
| × | 9,2 | $\sim 10^{-1}$ | • | |
| | Signature of Debtor | 1 | Signature of Debtor | 7 2 |
| | Date 4/21/20] | 8 | Date | |
| Did | you attach additi | onal pages to Your Sta | ntement of Financial Affairs for Inc | dividuals Filing for Bankruptcy (Official Form 107)? |
| | No Yes | | | |
| | | to pay someone who i | s not an attorney to help you fill o | out bankruptcy forms? |
| | √o ∕es. Name of pers | on | | Attach the Bankruptcy Petition Preparer's Notice, |
| | • | | | Declaration, and Signature (Official Form 119). |

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| Debtor 1 | Delores | Tomorrow | Balogun | |
|--------------------|---------------------|-----------------------------------|-----------|------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| Spouse, if filing) | First Name | Middle Name | Last Name | T-1/ |
| Jnited States | Bankruptcy Court fo | r the: Northern District of Illin | nois | ¥ |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C |
|--|--|--|
| Creditor's name: Nissan Motor Acceptance | ☐ Surrender the property. | ⊠ No |
| Description of 2017 Infinti QX30 | Retain the property and redeem it. | Yes |
| property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |
| Creditor's name: | ☐ Surrender the property. | — No |
| The state of the s | Retain the property and redeem it. | Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | 00 |
| | Retain the property and [explain]: | |
| Creditor's name: | ☐ Surrender the property. | □ No |
| | Retain the property and redeem it. | Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | □ No |
| | Retain the property and redeem it. | ☐ Yes |
| Description of property ecuring debt: | Retain the property and enter into a Reaffirmation Agreement. | · - · |
| | Retain the property and [explain]: | |

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Debtor 1

Tomorrow Last Name

Balogun

Case number (If known)_

| I in the information below. Do not list real estate leases. <i>Unexpired leases</i> are leases that are still in effect; the lease period has not yet inded. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? | | | |
|--|---|--|--|
| | | | |
| Description of leased property: | ☐ Yes | | |
| _essor's name: | □ No | | |
| Description of leased property: | ☐ Yes | | |
| essor's name: | No | | |
| Description of leased property: | ☐ Yes | | |
| essor's name: | | | |
| Description of leased property: | Yes | | |
| essor's name: | □ No | | |
| Description of leased property: | Yes | | |
| essor's name: | | | |
| Description of leased property: | Yes | | |
| essor's name; | □ No | | |
| Description of leased roperty: | Yes | | |
| | Yes | | |
| 3: Sign Below | | | |
| der penalty of perjury, I declare that I have indicated my intention about sonal property that is subject to an unexpired lease. | any property of my estate that secures a debt and any | | |

Date MM / DD / YYYY